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THE UNIVERSITY, THE SCHOOL OF NURSING AND THE SUBSIDIARY GROUP¹

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Look! if a beggar, in fixed middle life,
Should find a treasure,—can he use the same
With straitened habits and with tastes starved small.
And take at once to his impoverished brain
The sudden element that changes things,
That sets the undreamed-of rapture at his hand,
And puts the cheap old joy in the scorned dust?

We call the treasure knowledge, say,
Increased beyond the fleshly faculty—
Heaven opened to a soul while yet on earth,
Earth forced on a soul's use while seeing heaven.²

THE ambitious title of this address to each item of which could be well devoted the entire paper was not suggested altogether, or even primarily, by the Rockefeller-Goldmark report, but rather through devious channels of thought by an address of Professor Field of Toronto entitled "Universities, Research and Brain Waste."

May I ask by way of preamble before discussing, as I propose to, several of the conclusions of the Rockefeller-Goldmark report with which in part I differ, if anyone conceives that it would be possible to gather together a committee of persons, pronounced experts, either

because of a profound body of knowledge, or a long and varied experience, and have them agree in detail on the various items of the problem under discussion. In so far as they are experts, however, having affixed their signatures in agreement on the fundamentals, is not the responsibility laid upon them if they do differ, to explain how and why, in order that those who are accepting their conclusions may at least have the benefit of the variations in them which seem to any particular member fundamental to a successful furtherance of the project in hand?

A second and more important paragraph of my preamble sums itself into an expression which in no way can I make other than wholly inadequate of appreciation of the time and thought extending to an immeasurably

¹ Read at the annual meeting of the New York State Nurses' Association, October 24, 1922.

² An Epistle Containing the Strange Medical Experience of Karbala, the Arab Physician.—Robert Browning.

overdemand of physical and mental strength, on the part of Miss Goldmark, in order that the contribution of the nurse to the health of the community shall measure up to a truly extraordinary opportunity for service.

Now for my three-fold subject:

THE UNIVERSITY

"The highest functions of a university," says Professor Field, "are on the one hand to provide place and opportunity for the research worker to carry on and make his discoveries and, on the other hand, to train young men of *selected ability* to use their creative faculties." There are others who have expressed the function of the university to be that of standardization. I regret exceedingly that the time will not allow me to quote at length from Professor Field and that I shall have to limit myself to one further brief quotation:

Whatever the undeveloped resources of a country may be, the greatest of all its resources is the brain of the people and more especially the brain of the exceptionally gifted. Other resources in fact are made available only by the combination with this primary resource. The wealth of the race consists of the thoughts of a limited number of men accumulated through the generations.

I find myself constrained to discuss, for a brief moment, a matter which is assuming ever greater significance and which this conception of the university again brings forward. I think more in the past, possibly than in the present, but nevertheless still definitely with us, is the tendency to give too much thought to the means through which a given end is reached, and thereby to lose sight of the matter of supreme importance, the end itself. Formerly in the field of theory, indeed, this tendency

to which I refer found its expression not infrequently in the accusation of plagiarism. For myself, I know that beginning with the proverbial first school room, my mother's knee, on down through all my contacts with human thought, living or dead, all that I do, or say, or think, is but a composite photograph of these contacts, for my memory flashes upon every problem under consideration, often in such exact words, the thoughts of others bearing directly or indirectly on the matter in hand, that I have even come to have an understanding of the slight thread which lies between an appreciation that these are flashes of memory, and the hallucination of the mentally unbalanced which translates such flashes into actual voices. If this is the case with me, it must be, I conceive, with others and so I have come to wonder if we are not too much concerned with the instigators of projects and as to the devious ways, channels, or what you will, through which such projects are achieved, and to believe that this habit is so disturbing and retarding an element in the already too slow unfolding or development of creative schemes as to justify facing the fact squarely in an effort thereby to overcome it. To illustrate: Chanticleer played indeed a distinct part between the ushering in of the day and the sleeper when his crowing announced the dawn, the error was to imagine that part to be the creation of dawn itself. If more importance were attached to the *awakening* of the sleepers, we find ourselves querying, "Would the wealth of the race consist of the thoughts of a *limited* number of men?"

Conclusion 8 of the Report of the Committee on Nursing Education states:

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the development and strengthening of University Schools of Nursing of a high grade for the training of leaders is of fundamental importance in the furtherance of nursing education.

In the paragraph preceding this conclusion appears the statement:

It should be made quite clear that the Committee does not recommend that nursing schools in general should work toward the establishment of courses of a character that a University would accept for a degree. We realize that the numerical proportion of the nursing profession to be contributed by the University School will perhaps always be a relatively small one. Yet we believe that the importance of this portion of the educational structure would be difficult to overestimate.

Professor Field's conception of the function of the university would seem to fully accord with the conclusion of the Committee of the part of the university school, and the temerity, therefore, to say nothing of the inconsistency of a member, who signed that report, taking issue with it, is obvious. Yet such issue I take!

As some present know, it was my great good fortune to be invited this summer to give a course in the University of Washington in Seattle. What I observed there, and such subsequent study as I have given the matter, has confirmed the belief which I had previously no first hand knowledge to substantiate, that in the not remote future the professional preparation of a nurse would be based on one or more years of college preparation. I am now convinced that there is a definite difference of opinion between the far east and the far west as to the educational foundation of the population at large. I believe that it is generally accepted in the east that comparatively few of the young people will enter the high school, where-

as, in the far west, every effort is brought to bear that all of the young people shall go through the high school, and a very definite responsibility is assumed to enable as many as possible to continue to go beyond that. By way of proof, let me present the following statistics taken from the Report of the United States Bureau of Education of the school population census. The age group which seems to bear most directly on the question at hand is that which relates to the population between 18 and 20 still in school and which shows in part as follows: In the northeastern states, 12 in number, the highest percentage—17.8% is found in Maine, the lowest in New Jersey—10%, while Pennsylvania, New York, Rhode Island and Maryland follow closely with a percentage ranging from 10.8% to 11.4%. In the southern states, 14 in number, North Carolina leads with 19.1%, while Louisiana stands at the foot with 10.7%. In the central western states, 12 in number, Kansas leads with 20.8% with Iowa and North Dakota following with 19.4% and 19%, while Michigan and Illinois fall to 12.2%. In the western group, 11 states in number, 8 states show over 20% still in school, Utah leading with 24.7%, Oregon 24.4%, with Arizona at the foot—14.4%.

My statement that a very definite responsibility is assumed to enable as many as possible to continue beyond the high school is based on adjustments whereby the state universities are able to give financial assistance to their students.

In reply to a request for definite information in this matter, I have received a letter from Miss Lusby of the Home Economics Department of the

University of Washington, a brilliant young woman, who while teaching Institutional Administration, provides through the Commons the best and most attractively served food at the lowest possible price that it has yet been my good fortune to find. She writes at length both concerning the use of student labor and the adjustments for those students who are taking courses in the Home Economics Department itself, adjustments which have a distinct relation to our own problems of adjustment within the hospital or other organizations where students are obtaining field experience. I will only, however, give you a few most important excerpts:

The minimum salary for this group is \$65 a month, for the helpers, and the maximum is \$114 for the heads of departments. Two meals a day are furnished, but no living quarters. The rest of the work is done by student workers, who spend from one hour to five hours a day at the Commons. The work comes at the serving hours, and is broken shift. They are paid forty cents an hour, and must pay for their own meals.

We select these students from all departments on the campus, according to our standards for student employes. Few of them have had any previous experience in this kind of work. We make no discrimination in wage for these student helpers, as the forty cent wage is the standard student wage on the campus. I have found a great deal of dissatisfaction among the students, in the one or two instances when a student has been paid a higher wage. The standard amount seems to stand, to them, for a certain democratic condition of employment, which they seem to cherish. As practically all of the students are totally inexperienced when they come to us, and as they consider it a privilege to have positions at the Commons, we have no "labor problems" here, nor do we have any feeling of resentment at the dearth of increases.

It will, I am sure, be of interest to

you to know that a study has been made of the effect of student work upon the student's standing. This study has not yet, I believe, been released, but the preliminary report came to my hand and would seem to show that the most highly qualified students can make both a mental and physical output without lowering their class standing. Of those who accept the present evaluation of national intelligence as recently revealed to us, we would ask, if they would not acknowledge that through present day science such intelligence might be continuously and immeasurably raised, but we would also ask if it is believed that women should be admitted to a profession concerned with so serious a matter as the health of the community whose intelligence did not permit of their carrying work of university grade. Judged by the many thousands who are finding it possible to complete successfully the university course, we should hesitate to allow the standards of intelligence to fall below this.

I could spend and well spend my remaining minutes, or indeed some hours, in discussing whether we desire to further the idea of the far west or to accept the thought, if I am correct in it, of the far east, the subject to be dealt with under the caption "Brain Waste." The brain waste that Professor Field deplures—and deplorable it is—is the use of the research mind for teaching purposes at the expense of research itself, but the brain waste that I would discuss harks back to Professor Field's statement that the greatest of all resources of a country is the brain of the people and that other resources are made available only by the combination with this primary resource. My

discussion would fall under three divisions.

1. *The use of knowledge for those unconcerned to have it*—Beginning with Solomon who, surfeited with learning, deplored the making of many books, and the weariness of study to the flesh, many centuries before the printing press had opened the door of knowledge to the common man, down to this present moment, hosts of young people, who have no desire for learning or no intention of putting their knowledge to use, have filled the class rooms at the expense of the young people who are longing for and need that privilege.

2. *The failure to determine who shall have the privilege of the university education on the basis of the value of the various branches of work to the social efficiency of the country*—The most superficial consideration of the question would, it seems to me, lead to the conclusion that those agents, concerned with the development of a physically, mentally and morally, if you will, perfect human being should head the list of those requiring the soundest and most comprehensive body of scientific knowledge and that the failure to so provide was profoundly wasteful. To illustrate—The Home Economics Department takes a humble seat in the School of Agriculture, while the school of nursing, whose value is evidenced by the ever increasing use of its graduates by federal, state, county and municipal governments, still knocks timorously at the University door.

3. *The loss of already acquired knowledge through a failure to disseminate it as widely and rapidly as possible*—a mummification, as it were, of the immortals which as one thinks it

through, is perhaps, the most tragic waste of all.

THE SCHOOL OF NURSING

Whatever our attitude may be tomorrow, today we do not and cannot subscribe to a shortening of the period of training to less than three years for those who have not had two or more years of college work. That an entire readjustment is called for, is obvious, and such a readjustment is outlined in the paragraph preceding conclusion 5, but we do not believe that the relieving of the non-educational features now included in the course of training will provide adequate time for those additional subjects which we have long agreed were essential, but have not as yet been accepted. We refer to courses both in the theory and practice of mental and nervous diseases, venereal disease, tuberculosis, and communicable diseases. It is an old and unsolved problem which we shall not attempt this evening to discuss. But I want, at least, to read the following excerpt which appeared in the New York Times on October 12, 1922 as presenting a picture of this need:

State Senator, Henry M. Sage, Chairman of the State Hospital Development Commission, reported that more than 50,000 patients and inmates were wards of the State. Declaring that it was costing approximately \$22,000,000 yearly, Senator Sage gave this table:

<i>Institution</i>	<i>Inmates</i>
Fifteen insane hospitals (2 criminal).....	39,391
Four hospitals for feeble-minded	5,521
One epileptic hospital	1,534
Seven reformatories	3,356
Two veterans' homes	665
Two schools	375
One tuberculosis institution	301
One hospital for children	200
Four prisons	4,741

In all our four institutions for the feeble-minded, we have only 5,521 inmates. I have not the figures for the private hospitals, but they probably do not house many more. If there are 30,000 mentally deficient in the State, this means that 20,000 are at large, but the figures are misleading, because they include morons and all border-line cases. It is very disturbing to realize that these people are at large and must continue to lower the average intelligence of the State.

Mr. Sage then spoke of the various other burdens imposed upon the State, such as, support of schools and colleges, the widowed, sick and the old, saying that the "economic end of the State can easily be foreseen unless we employ adequate preventive measures." There is no agent who has such power today as has the nurse.

We are only too well aware that the still prevailing conditions in the mental hospitals relating to prolonged hours of duty, etc., give ample excuse for a failure to include this experience in the content of every student's course. But we are also aware that further platform discussion of this matter is of no avail. The needed change can only be brought about by a deepened sense of community responsibility.

My experience of the past five years leads me to the belief that hardly less important is the projection of every student into that extra-mural hospital, the tenements of our city streets, through the visiting nurse organizations for a three to four months' experience, an experience pronounced the most interesting and valuable of their training by literally hundreds of students who have had the opportunity to test it.

It is argued that it is not safe at the present time to urge this because it will be impossible to provide adequate instruction and supervision. It will be

recalled that those notable women—Louisa Lee Schuyler, Mrs. William Church Osborn, Mrs. Robson, and Abby Woolsey whose remarkable monograph—"A Century of Nursing" should not be lost to the history of our profession, had the vision to predict a college of nursing in 1871 and to realize that the school of nursing should be of normal school grade. Fortunate indeed was it for the hospitals not less than for our profession that these women did not wait until this desired standard of education had been reached to provide hospital experience for the students, but projected students into the wards of Bellevue where the situation has been described as that "of thirty patients with one nurse without an assistant, one-fifth of the time of a night nurse and one ward-maid, if the ten-days prisoners convicted of drunkenness, who do the cleaning, can receive such a title." The thousands of students pouring out of our schools of nursing yearly under the direction of the now hundreds whose pre-nursing preparation has been of college or normal school grade, and many of whom have had teaching experience, might work a not less rapid and remarkable change, in our city streets, than did their sisters in the hospital wards.

THE SUBSIDIARY GROUP

My attention has been called, and very justly, to a statement which I made when inspector of the nurse training schools of the State and which appears in the 1911 report of the State Department of Education relating to the training of attendants. My belief in the need of such a subsidiary group is not less strong today than it was then. My

method of meeting this need has in more than one aspect distinctly changed. When I first saw the need I had not come in contact with the more progressive educational thought of which Professors Dewey, Thorndike, Kilpatrick and McMurray are the exponents, nor had there been opened to me a somewhat different trend of thought, but of not less significance. I refer to such thinkers as Thorstein Veblein, Helen Marot, Sidney and Beatrice Webb, Albert Korzbyski, Cassius J. Kayser, R. H. Tawney, and Robert Wolf,—men and women who are concerned to solve the problem of a satisfying life not for the few, but for Man, and whose considerations are striking deeper, therefore, than those men who led us on the new and important road of efficiency methods, preëminently, Taylor and Galbraith, for they are seeking rather to give to each worker of that energizing current which is perhaps most generally expressed in the term—creative impulse.

Heaven opened to a soul while yet on earth,
Earth forced on a soul's use while seeing
heaven.

When the light of this thought has once dawned upon us, we can no longer permit any human being to be diverted from channels which will lead him to ever higher and greater ends.

Today we see that for those workers who are to deal effectively with the convalescent period of sickness is required an extensive body of knowledge in which psychology, psychiatry, the therapies, etc., play an important part. For those to whom we would relegate the simpler nursing tasks, we would emphasize the importance of the provision of instruction that will insure

tactile skill and technical efficiency for each task no matter how simple, but we also believe that the hours of duty should be such as to make it possible for these young women, if young they are, to make up their deficiencies in secondary work, while filling these positions in order that they may enter the nursing profession, if they are drawn to that particular field of labor and to which they have already had an introduction which will increase their efficiency. Already this is happening to a far greater extent than we realize, but it is happening with a greater demand upon these young workers than I believe should be imposed. That courses can be taken and enjoyed while performing arduous manual tasks, we have a definite evidence in the something over forty of the staff of the Visiting Nurse Service of New York City who are taking anywhere from two to twelve points at Columbia while giving anywhere from twenty-eight to forty-four hours a week in the field, and who must forego, thereby, all luxuries of food, raiment and diversion, since their salaries provide but a bare margin over the sum needed for necessities.

In this connection, and lastly, the Report of the Committee on Nursing Education finds its summary in an emphatic statement of the importance of endowments for the school of nursing, a subject ably dealt with, as many will recall, by Miss Nutting, under the title, "A Sounder Economic Basis for the School of Nursing." In this conclusion, I believe most profoundly, but I believe that a not less important step to be taken is the provision of "A Sounder Economic Basis for every Hospital."

Health has become the business of the

people. No business is carried on effectively, or indeed at all, that does not provide for the payment of labor. Our communities today must no longer lay the burden of the care of the sick on the workers for the sake of its own health, not less than for the sake of the workers themselves. Not less for its own benefit than for the benefit of its staff should be the hospital pay for the labor of internes, student nurses, and other workers. Where it provides instruction through the period of such service, it should base its payment on the cost of such instruction, but wherever paid service would have to be employed, but for an existing student body, an exact equivalent for service rendered should be allocated to the school budget. If the Visiting Nurse Organizations can provide the required budget for a paid graduate staff and install a forty-four hour week, is there any reason why the hospitals of the country should not do likewise?

This is a wonderful period in which we are living. Great vistas of unexplored marvels are opening daily before us. Undreamed-of creative schemes and possibilities through the achievements of science follow in rapid succession. The vision of them is an unfailing source of inspiration. I have spoken of the scholars who are opening these marvels to the man in the street. I have not mentioned another vast and powerful body of thought which finds expression

through the constantly broadening programme of workers' education. Whether we adjust to the joint programme of education and labor suggested, or not, this last mentioned body of human thought will eventually bring it about. Should not we who know the weariness and roughness of the road over which we have traveled in our effort to obtain a body of knowledge in any measure commensurate with the demands and potentialities of our field be the first to guide the steps of the coming generation of health and indeed all workers along the better way?

Let me end as I began with the vision of one of those high priests of progress, a poet:

Be sure they sleep not whom God needs,
nor fear
Their holding light his charge, when every
hour
That finds that charge delayed, is a new death.
This for the faith in which I trust and hence
I can abjure so well the idle arts.

* * * * *

'Tis time
New hopes should animate the world, new
light
Should dawn from new revealings to a race
Weighed down so long, forgotten so long, thus
shall
The Heaven reserved for us at last receive
Creatures whom no unwanted splendors blind,
But ardent to confront the unclouded blaze,
Whose beams not seldom blazed their pil-
grimage
Not seldom glorified their life below.'

* *Paracelsus*—Robert Browning.

A TIME-SAVING BANDAGE MACHINE

BY LILIAN M. THOMPSON, R.N.

THE Cook Plaster Bandage Machine which is the invention of Dr. Ansel G. Cook, of Hartford, Connecticut, has been in constant use during the past year at the Hartford Hospital and has been found to be entirely practical and easy to operate. We believe every hospital should have one in order that the surgeons may at all times have at their disposal an unlimited supply of perfect plaster bandages, and that the nurses may be relieved from the tiresome drudgery of rubbing plaster of Paris into crinoline by hand.

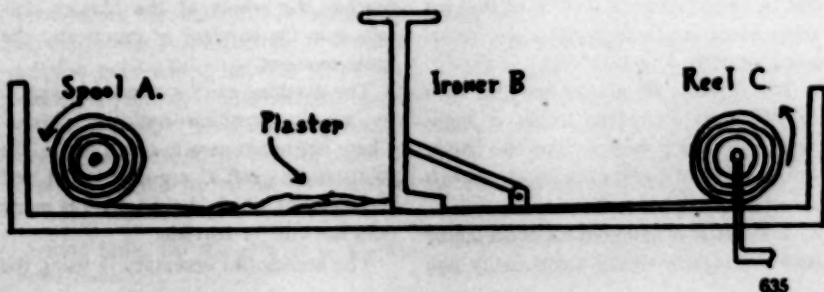
This machine is economical because it saves waste,—waste of time, and waste from imperfectly made plaster bandages that have to be thrown away.

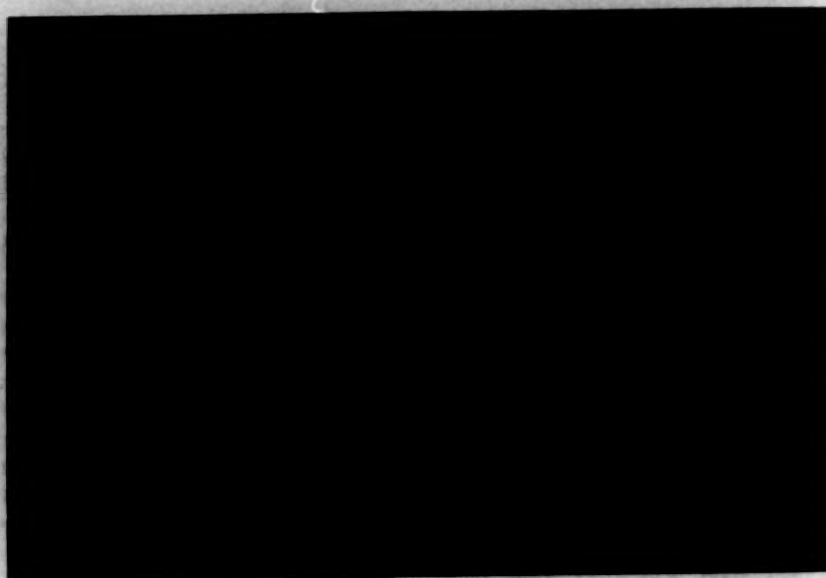
The machine is simple in construction and not likely to get out of order or wear out. No effort has been made to see how fast it can be operated, but on several occasions one operator has had no difficulty in making one hundred bandages in three hours,—an enormous saving of time when compared with the five to ten bandages per hour produced by the old method.

The following diagram explains the principle on which the machine works:

A crinoline bandage placed on the spool A passes under the ironer B and is wound on the reel C. Plaster of Paris is placed on the crinoline bandage after it leaves the spool A and before it reaches the ironer B.

As the bandage is drawn under the ironer the plaster is pressed into the meshes of the bandage. This is the point of the whole machine,—the plaster is not merely thrown on to the surface of the bandage and the superfluous plaster scraped off the surface by a scraper, but the lower surface of the ironer is set at such an angle that more plaster is admitted than can pass through and the difference between what is admitted and what is allowed to pass through is pressed (ironed) into the meshes of the bandage. The effect is the same whether an even layer of plaster of the desired thickness is ironed into a stationary bandage by a movable iron or whether a movable bandage is drawn under a stationary iron. The weight of the ironer is sufficient to prevent its being raised as the bandage and plaster are drawn beneath it, and as there is more plaster drawn in than can pass through, the excess plaster is forced downward





THE COOK PLASTER BANDAGE MACHINE

into the bandage. As the crinoline bandage, having thirty-two threads to the inch, into which the plaster is to be driven is only about one one-hundredth of an inch in thickness, the angle is not great but it is there and it is sufficient. The bandage and plaster passing under the ironer are pressed between the lower surface of the ironer and the upper surface of the bottom of the metal pan on which the machine is mounted. The ironer is mounted on a swivel so that it can be raised and the surface of the pan swept clear of plaster when a new bandage is started.

The amount of plaster passing with the bandage under the ironer is regulated by raising or lowering the ironer by means of adjustable set screws attached to the ironer.

The reel B is mounted on self-aligning ball bearings so that it turns easily and

smoothly and the reel spindles are made double so that the bandage is easily attached. When the double spindle is removed from the finished bandage it leaves a cavity in the center of the bandage.

This cavity is a great advantage, for when the bandage is immersed in water before using, the water not only penetrates from the outer surface inward but also from the cavity in the center of the bandage outward. The water thus reaches the whole of the plaster contained in the bandage at practically the same moment.

The machine can be cleaned instantly by simply brushing out the plaster. There are no corners to catch dirt. The joints of the reel C are dust proof and the metal of which the machine is made does not rust or corrode.

The accessories necessary in using the

machine consist of a gauge ruler to measure the crinoline, so that it may be torn into bandages of the desired width, a scoop to distribute the plaster, a brush to sweep the pan, and scales to weigh the finished bandage.

Plaster bandages from one to seven inches in width and from one to twelve yards in length, and containing as much or as little plaster as is desired, may be made with the Cook Machine.

The Hartford Hospital standards are

as follows:

"(1) 4 yards long, three and three-eighths inches wide, circumference 6 inches, weight two and one-half ounces; (2) 6 yards long, four and one-half inches wide, circumference 7 inches, weight 5 ounces; (3) 8 yards long, five and two-fifths inches wide, 8 inches in circumference, and 8 ounces in weight. The finished bandages are wrapped in paper napkins and are stored in a covered container.

NURSING—A BIRD'S EYE VIEW¹

BY SUSAN V. SHEAFFER, R.N.

THE art of nursing, at once the oldest occupation for women and one of the youngest professions, must have been co-existent with the first mother who performed for her little ones all those services which made it possible for them to live and thrive. The daily and hourly details of feeding, warming, and protecting from harm; the watching by night; the rhythmical swing of cradle or bough under the mother's eye—these maternal cares as old as, or even older than the human race, laid the foundation from which our profession of nursing has developed to its structure of today. Whatever nursing may have been before the dawn of Christianity, it is certain that every doctrine of the new religion gave added impetus to its forward movement. The second great commandment, "Love thy neighbor as thyself," could find no readier mode of expression than in caring for the sick and the helpless.

We find the early Christians following the ancient sacred custom of hospitality with the new motive of loving service added; they held their goods in common and opened their homes freely to the sick and destitute. The deacons and deaconesses were especially zealous in seeking out cases of need, and not only nursed the sick by a system of visiting nursing, but brought them when necessary into their own homes to be cared for. The bishops, who were natural centers towards whom the afflicted gravitated, kept open house, and wealthy and well-to-do members of their congregation, followed their example. This was the simple original form of the modern hospital and of all other varieties of charitable institutions. The diakonis, as these home hospitals came to be called, associated the diaconate with the work of nursing. Phoebe (60 A. D.) wealthy and of high social standing, the friend of St. Paul, was ordained the first deaconess of the Christian Church. Inasmuch as nursing was one of the duties

¹ Read before the Rotary Club of Easton, Pennsylvania

of a deaconess, we may safely name Phoebe as the first Christian nurse.

One of the earliest known instances of nursing was during a violent pestilence in Alexandria between the years 249-263 A. D. At this time of public calamity, the Christians, regardless of the danger to their own lives, visited, relieved and attended the sick, and comforted the dying.

Another great instance was connected with a frightful epidemic in Edessa about the year 350 A. D. The inhabitants were in great despair and the wealthy citizens, though willing to give freely of their means to stay the plague, knew of no honest or capable agent to undertake the relief. In this extremity, out of his retirement, came Ephrem—a deacon of Edessa, and offered his services. With the money given by the rich citizens, he purchased 300 beds and placed them in public porticos and galleries. The sick were brought thither, and Ephrem visited them and served them with his own hands; he administered the funds and controlled the situation until the plague had passed. This is of special interest, for St. Ephrem evidently established hospital wards in one of the earliest if not the earliest hospital on record. Separate buildings, devoted entirely to the care of the sick only, did not become a separate entity until about the 12th Century. The earliest hospitals cared for the sick, the poor, and foundlings.

The Order of Deaconesses spread rapidly with the growth of Christianity. Three hundred years after Phoebe, we find in Rome a group of women, of independent position and great wealth, engaged in establishing foundations for charity and for nursing. Among these

was Marcella, who converted to Christianity Fabiola and Paula. These two patrician women devoted their lives and vast fortunes to work among the poor and sick,—Fabiola in Rome and Paula in the East. It was Fabiola who, in 390 A. D., built in Rome the first general public hospital.

With the rise of monasticism during the next centuries, and with monks and nuns looking after the sick, nursing became associated with the church. A digression from this was seen in the founding of two hospitals in 1050 at Jerusalem by ten Italian merchants to care for the sick on pilgrimage to the Holy City. These were under the protection of St. John the Almoner and St. Mary Magdalene, and for years remained purely lay; later, however, coming under the influence of the church. This hospital of St. John was the cradle of those famous military nursing orders, the Knight Hospitallers of St. John of Jerusalem of Rhodes of Malta, which were actively prominent for more than seven centuries.

During the 12th and 13th Centuries our attention is drawn from southern Europe to Belgium where a free order of nursing was established by a priest of Liege. This order continues to the present day.

In 1634, St. Vincent de Paul founded the order of the Sisters of Charity, forerunners of the Visiting Nurses and to this day a flourishing organization. Its members have rendered noble service in war and in peace, turning their endeavors particularly to the poor and needy.

In England we find the early development of nursing following the lines of Continental Europe. The founding of

the hospital of St. Katherine by Queen Matilda in 1148 is of importance in that to it may be traced the founding of visiting nursing in England. Its charter expressly provided that the ladies who served it should visit the sick and nurse them in their homes. Of historical interest is the founding of the present great St. Bartholomew's Hospital in 1123 by Rahere, in youth a courtier of Henry I.; in later life abjuring worldly pleasures and devoting his remaining years to the Church.

The years of the 18th Century are the darkest in this entire movement. In the early part of the 19th Century we see signs of a nursing renaissance. The first great step was made by Theodore Fliedner, a young pastor, and his wife Frederike, who undertook in 1836 the establishment at Kaiserswerth, Germany, of a hospital and deaconess' home. It was this highly successful work at Kaiserswerth which laid the foundation upon which has been built our present system of nursing. The fame of Kaiserswerth spread rapidly. It was but natural, therefore, that Florence Nightingale should turn to this source for her early training. It was the Crimean War, however, that offered this great spirit the opportunity to apply her many ideas and her well conceived knowledge of nursing. What Florence Nightingale accomplished in the Crimea needs no recording; it is a matter of common knowledge. Yet her greatest contributions to nursing were still to be made. Four years after her return to England in 1856 there was established under her supervision at St. Thomas' Hospital, London, the Nightingale School for the training of nurses. Yet no sooner was this well under way than she turned her

attention to the betterment of health conditions in the Army, the planning of proper sanitation for India, and to other equally urgent and engrossing reforms. It was the indomitable spirit, the dynamic personality, the great mind and soul of Florence Nightingale which insured the complete triumph of nursing over all obstacles.

About the time our Civil War was at its height, Henri Dunant, a Swiss, conceived and carried to completion the idea of a Red Cross. This was in 1863. Three years later the Genoa Conference was signed by representatives of the leading countries, thus making possible the formation of Red Cross societies throughout the world. The American Red Cross was organized by Clara Barton in 1881. The heroic service rendered by this great organization during the Spanish-American War and the World War in the home and on the battle-field will live forever in the hearts of the soldiers and of the bereaved and destitute families at home.

The development of nursing in the United States naturally was directly influenced by the work being done in Europe. In our early hospitals,—Bellevue of New York, Blockley and the Pennsylvania of Philadelphia, the nursing was done either by inmates, prisoners, or paupers. Conditions were indescribable. Realizing the necessity of trained nurses, a class for nurses was opened at the New York Hospital in 1789. We find this plan did not appeal to other hospitals, and for almost the next 100 years the only skilled nursing was done by religious orders, Sisters of Charity, Deaconesses, and others.

With the founding of the New England Hospital for Women at Boston in

1872 we find the first systematic training school for nurses in America. It was from this school that Linda Richards, "America's first trained nurse," was graduated. Other hospitals were slow in following this lead, and in 1883 we find established only 22 other training schools. But after 1890 the advance was rapid, and by 1900 there were reported to be 27,000 nurses at work. The development in the last 20 years, stimulated by the World War, has been tremendous, there being approximately 150,000 trained nurses in the United States at the present time.

With the revival of nursing of the 19th Century, coincident with the rapid growth of medical knowledge (and there are many who believe that medicine has advanced on the shoulders of nursing) there were destined to develop distinctly different fields of nursing. The term "nursing" originally embraced little but personal service to the sick. Today it may mean executive or educational work, inspection, or organization of the work of others. The full-fledged nurse of the 20th Century has placed before her many fields of service; such as: Hospital Superintendent, Principal of Training-school, Night Superintendent, Oper-

ating-room Nurse, Head Nurse or Supervisor, Anesthetist, Instructor in Nursing, Dietitian, Private Nurse, Hourly Nurse, Visiting Nurse, School Nurse, Industrial Nurse, Department-Store Nurse, Insurance Nurse, Baby Welfare Nurse, Tuberculosis Nurse, Milk Station Nurse, Rural Nurse, Hospital Social Service Nurse, Army, Navy or Red Cross Nurse, Supervisor of Household Nursing Association, Office Nurse, Resident Nurse in Boarding School or College, Laboratory Nurse, Occupational Instructor.

Nurses are also employed in the inspection of tenement houses, in massage, hydrotherapy, and the giving of medical gymnastics, as policewomen, etc. Some are devoting themselves to literary work, and a few have gone into hospital planning and equipment. New fields are coming into view every year, so that the list is never complete.

In this brief sketch is seen the important role that nursing has played throughout the centuries. The unconquerable spirit in overcoming all obstacles, courage in the face of danger, and an unflinching adherence to the highest ideals have made this triumph possible.

Said a high school Principal, meeting a representative of the Central Council of Nursing Education, "We are glad to have you with us. We have five nurses in this community, two are married to doctors, one to a banker, and two to leading citizens here. One of them is on our school board and all are good citizens; they are right behind everything that makes for the highest community welfare. If you turn out women like these from your schools, I wish every woman could take a course in nursing."

THE NEW SOCIAL CONSCIOUSNESS IN SCHOOLS FOR NURSES

BY CLARA A. GRIFFIN, B.A., R.N.

"BURIED alive," "a prison sentence," "three lost years," and phrases of similar intent are sometimes heard on the lips of outspoken young persons who refer to nurses' training. The most severe of these critics are generally girls without first-hand experience, who are discouraged from entering the profession of nursing by their fear of its privations and hardships. It is true that if they expect a continuous good time, or if they do not anticipate the satisfaction that comes from intellectual and physical effort, they had best look elsewhere, but if their interest is sincere, they need not be frightened away by the bugbears of military discipline and the cloistered life.

Together with the wealth of opportunity that awaits the nurse of today come increasingly varied and exacting demands which call for more than a technical preparation alone. To meet them, the training school aims to offer its students broader cultural opportunity and a social life which will add to their development. Its contribution is of value in proportion as the nurses themselves are allowed to take responsibility and exercise their executive ability, initiative, and power to cooperate. It is becoming more and more a recognized fact that the benefit derived from social activity is greater and more keenly appreciated by the girls themselves, when it comes as the result of their own efforts.

We are not out to discount the part which the hospital should bear, or to imply that the genuine interest of the

superintendent has any substitute, or is not just as vital to every phase of the school's activities as it has always been, but the growing tendency seems to be for her to direct her efforts rather toward stimulating some spontaneous expression of the play impulse from the students themselves, than to stipulate the given form which it must take, or impose a fixed schedule for its appearance.

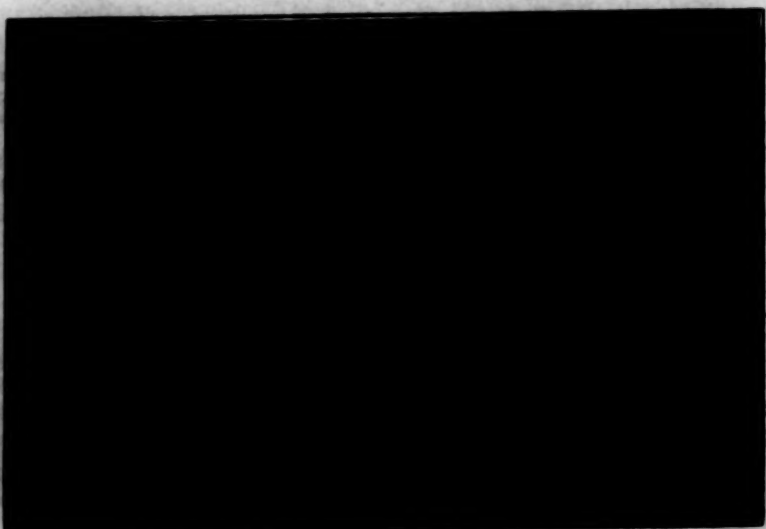
The growth of student government in training schools has made it possible for the student body to take a full share in directing the social life of the school. We are apt to think of this organization as existing only to make and enforce rules, forgetting that this function of lawgiving is the lesser half, and that complete realization of its power comes when it expresses community opinion, and the desire of the student body for self-improvement and recreation. Where a well developed student government association exists, it should be able to take full charge of the social schedule. In other cases, a student nurses' club is sometimes formed, a social committee appointed, or the responsibility is divided among different classes or groups.

In many western schools the Y. W. C. A. has been instrumental in bringing much of pleasure and profit to undergraduate nurses. An odd situation arises in which we have the training school passively allowing an outside organization to bring to its students something that it is either unwilling or unable to provide for them. The reason, of course, is largely financial. The Y. W. C. A.,



Courtesy Central Council, Nursing Education.

IN THE NURSES' HOME



Courtesy Central Council, Nursing Education.

GYMNASIUM CLASS

a going concern, with recreation directors and equipment already on the job, is able to assist in fulfilling obligations which the hospital has incurred, but has not yet arrived at the point of meeting. The arrangement is like a sign post pointing along the way of future development, showing that a real demand has made its appearance and is waiting to be met by the appropriate supply.

The luxury of having a social director, while put to the test by only a few schools, is reported as very satisfactory. Such an official may give full or part time, but should live with the girls and be at hand to enter into their plans and projects. Her endeavor is to leave to them all possible freedom and initiative, but to assist them with her fuller experience in making their programmes more varied and more co-ordinated, and to stimulate their interest in the more profitable forms of recreation. It may also be her privilege to clear away many misunderstandings between the students and the office, and to foster that delicate and cherished plant known as "the right spirit," or at least a loyal and vigorous school spirit.

The aid and abetment furnished by the hospital itself varies with the size and policy of the institution. Graduation exercises range from simple affairs of home talent to formal programmes on which the speaker is a notable statesman or scientist, and may or may not be accompanied by a series of festivities terminating in receptions or dances with elaborate collations. In some schools much is made of the various anniversaries peculiar to the institution, such as its founding, or some significant event in its history, as in one eastern hospital

"Ether Day" is remembered. Or different stages in the progress of the classes may be marked for observance, as in one hospital the Probationers receive their caps formally in the presence of the whole school, and in another they are given a welcoming party. In others the Seniors are honored by farewell dances or May balls, or are serenaded, or they bequeath some symbol of their authority to the class beneath them.

The question of material aid is met in an equally varied style. Many hospitals can provide only a place to dance, with a piano or victrola. Others finance a given number of formal entertainments each year such as Christmas or Halloween parties, or dances of different descriptions. One hospital has a recreation fund which is endowed, the income from which is available each year. In many cases the nurses themselves meet expenses by dues or assessments, or by food and candy sales, or by subscription. Musicians or artists sometimes give their services for a series of musicales or dramatic readings. In other cases the hospital provides tickets to certain concerts and lectures, or it may hire a professional teacher for dancing classes, or a leader for training a chorus or orchestra, or for coaching a play. One hospital has a motion picture machine, another a stage and a small auditorium.

Athletics are beginning to play a part in broadening training school activities. New buildings in large hospitals are being equipped with gymnasiums and swimming pools. Roof space is being utilized for rest and recreation. A few hospitals have basketball grounds, while almost all maintain tennis courts. In many cases where a progressive policy outruns equipment, arrangements are

made for the use of a gym floor in neighboring schools or colleges. University hospitals are especially fortunate in privileges of this kind. The Y. W. C. A. offers numberless advantages, with many special classes or reserved nights for nurses. One hospital in the south enters its nurses on a convenient golf course, while one New England hospital made its students happy this winter by providing snow shoes, toboggans, and a double runner.

The eight-hour day or forty-eight hour week has made room for much that was formerly crowded out of the nurse's life. It has not only provided the time but has made possible that margin of energy without which play after work cannot be enjoyed. The nurse of the future will have energy to put into her time off duty the worth while things that enrich life. It will be seen that dramatics, as well as athletics, have been forced to await this truer balance between work and the rest period, since dramatic expression is generally late in making its appearance, and flourishes only where the social consciousness is homogeneous and expansive. The amount of time and energy required to produce any form of dramatic entertainment is greater

than most groups of nurses can expend. Nevertheless, the effort when made is many times repaid, and the school which achieved the Florence Nightingale tableaux, another which presented a playlet demonstrating nursing procedures, and others which revel in vaudevilles or minstrel shows, relate their successes in no measured terms.

To the girl who plans to enter the profession of nursing, it is seldom necessary to any words of caution about selecting her training school, for her tendency is to choose the most thorough and well grounded training that she is qualified to enter. But, other things being equal, we would advise her to give some thought to this question of recreation, so that she may select a school which is advancing along lines which seem to her harmonious with her own ideas and ambitions. The paths of progress are now branching into new forks and turnings; the way is untraveled and ill defined. But if the joys of pioneering can arouse her spirit, we invite this young candidate to join hands with us and explore the realms which the new social consciousness will open to the training schools of the future.

WHY I LIKE PRIVATE DUTY NURSING¹

BY BERTHA M. RICHARDS, R.N.

PPRIVATE duty appeals to me because of the deep interest and sympathy that one cannot but feel when realizing the helplessness of the patients entrusted to her care, depending as they

do for cheer, health, food and ease of both body and mind on the skill that only a trained worker can give.

This is especially true when working in the homes (as I like best to do) where family and friends are depending on me to "carry on," no matter how hard the duties involved.

¹ Read at the annual meeting of the Connecticut State Nurses' Association, Waterbury, January 25.

I like the feeling of being indispensable to another for her happiness and cheer, it spurs me on to greater efforts than the more mechanical service and fixed routine of an institution.

I always feel, too, that I am increasing my working knowledge of symptoms and conditions as I realize the doctor is depending on me for an accurate report of the patient's condition, whereas in institutional cases, one always feels that others are observing the case and so responsibility is shared and divided.

I think there is greater freedom for social activities and advantages in private duty work. One is constantly meeting new

people, usually on an equal social basis, who often offer countless opportunities for friendship and social intercourse long after professional services have ceased.

There is always a more or less "trying" period in every case, but this is easily forgotten in the feeling of satisfaction with one's self and one's work, for "I have lived in a house by the side of the road and been a friend to man." A glow of happiness cannot help but follow the closer intimacy of private work, such friendly intimacy as no difficult or interesting case in "Ward B," or "Room 20" can possibly permit.

WHY I TEACH

By SUSIE A. WATSON, B.A., R.N.

Because in passing on the living flame
That ever brighter burns the ages through,
I have done service that is worth the name
Can I but say, "The flame of knowledge grew
A little brighter in the hands I taught,"
I teach.

Because I know that when life's end I reach
And thence pass through the gates so wide and deep
To what I do not know, save what men teach,
That the remembrance of me men will keep,
Is what I've done, and what I have is naught,
I teach.

—Louis Burton Woodward.

IF a careful analysis were made of the motives, which lead the majority of young women into our better schools of nursing today, the summary of the variously expressed answers would show that it is to learn a means of self support which shall be worth while and of service to others. Service is an ideal instilled into us from our youth up, a response to the need of humanity. Who needs to be ministered unto more than those who are

sick in body, soul, or mind? What more satisfying work can there be than that in which we know we have helped some other human being to recover himself from his ailment, whatever be the cause! Nursing, as Miss Nightingale said many years ago, is to help the patient live, and our profession is engaged in that pursuit in company with the kindred ones of medicine and social service. All are humanitarian, to help

the diseased to become normal and ready to continue the work of living.

Does it occur to the young graduate who is choosing the particular field for which she shall aim, that she has not had to gain her knowledge by experience alone, but has been taught in various ways from the work of those who have gone before? One of the greatest needs of the profession is that of good teachers. It is a responsibility that should not be evaded by one who is qualified by education and temperament. Many would like to teach but think that their educational background is not sufficient. In these days of special courses for nurses, given by some of our enlightened universities, this deficiency can be met, if the desire for progress is strong enough to stimulate a willingness to work for what one wants. The educational requirements can be found more easily than the intangible ones of personality, for teaching in our schools is very much more than giving so many hours of instruction. We are preparing our students to meet the gravest moments in the lives of those whom they shall serve, and one's ability as a nurse means far more than simply the work she can do with her hands. Is it not serving just as truly if we help equip groups of young women to go out into the field which we ourselves might fancy, could we be spared? The Red Cross recognized this service when it refused to call out the nurse teachers in the great war, saying that their work at home, at their posts of duty, was more needed than any which they could do nearer the front.

Margaret Slattery said, in an address to women concerning their responsibility to teach right principles of living to

those who are following: "To be successful, the teacher must be three-fourths mother and one-fourth teacher." This shows the place which the actual classroom instruction occupies in the preparation of the nurse compared with the sympathy, understanding, and friendliness of the older for the younger woman,—understanding which gives her tolerance because she can see the other's point of view; patience because she can recall her own difficulties; friendliness which directs her attention to the pupil as an individual and gives a personal interest in each career. After all, when we go over the qualities which have made us most successful in this business of life, are they not those which began in the teachings at home? Educators of any kind can always tell when a girl has had a good mother who has given her the groundwork on which to build.

We are not expecting that the young woman just graduating will be able at once to become a teacher among those who are nearly of her own age and sometimes older, except through her knowledge of subject matter. In fact it is better for her to have a little more knowledge of life and human nature, and to acquire practical nursing experience before she tries to teach others. A well known hospital superintendent once made the disparaging remark: "Those who cannot do,—teach." If a young graduate has proved that she can do things, she is better qualified to know whereof she speaks in the classroom. The qualities which have been emphasized can be obtained only through interest in people. Each year of experience with people increases one's capacity for usefulness.

Thus far, the stress has been laid on

the duty and responsibility of this kind of nursing service, but there are things to be said of the rewards for as Browning says, "For sudden the worst turns the best to the brave." There are satisfactions to be found by those who are brave enough to develop this line of work and to stay in it long enough to gather them.

To those who are fond of study, the opportunity of keeping up habits of study and of following the new developments of medical science is alluring. One is more apt to keep her own information on a subject fresh when she is having to give it to others.

There is a certain zest about teaching. It is like a game in which the instructor's ability to impart is matched with the receptive power of the student. It is interesting, and a test of ingenuity, to plan and carry out laboratory work to clear up points emphasized in the classroom. Some pupils have the preconceived idea that they do not understand the subject and therefore cannot make any attempt to recite. It is a matter of skill to see if that pupil cannot be made to correlate what she already knows with the new and less understood subject. It sometimes resembles the landing of a fish; the teacher at first gets, "I don't know," in response to her question; she begins to gently lead the pupil toward the desired goal, frequently with a setback, but always approaching it by a circuitous route. Sometimes the keener members of the class watch the contest with interest and even endeavor to help along with suggestions. It is amusing to see the smiles of satisfaction on the faces of the class when the teacher finally compels the student to think out the correct answer. Everyone of us

hates to think, and until that power has been developed by practice we would rather say "I don't know," than to make the effort, if the question does not belong to the memory class. The examination papers tell the teacher what she must stress more, what she must change to a clearer way of presenting, and what has interested and impressed the different individuals in the class.

Most of us enjoy a novel in which there is a gradual development of character traced through the book. If we can become so absorbed in a fictitious personage, is not actual participation in character development more interesting? In the book we have an idea that certain qualities of the character we are watching will lead to certain results. In life, we are led to have faith in the powers of our friends. It is much more gradual a process in the three years of training, or more, than in the work of fiction, and it is a satisfaction to be told by one of whose success we are proud, that her first start came because we believed in her.

Perhaps the greatest reward of all which the nurse teacher has, is the opportunity for friendship. Having shown friendliness and interest in her pupils while they are in the school, she sometimes receives their affection and gratitude in return, for who does not like to be appreciated! From the standpoint of some students, the faculty may seem superior beings to whom such ordinary things as student affairs can have no interest and who must be kept at a proper distance. But to the teacher who is trying to be of the greatest help possible, there is something stimulating in knowing some of her students well outside the classroom. This she regards

as a decided asset. One who has taught us, whom we also know as a friend, occupies a position of her own in our

lives, and the teacher who can count as friends, in after years, her former pupils, is indeed fortunate.

SPECIAL RECIPES FOR DIABETIC PATIENTS

BY NELLIE I. MATHER, R.N.

THE following special recipes for diabetic patients have little or no food value and are exclusive of diabetic prescription. They add bulk to the diet of the ever hungry patient. They also add to the attractiveness of the trays, as the agar-agar jellies may be colored with vegetable colorings to give variety. The most convenient to make and the most agreeable to the patient are:

Bran Wafers: Washed bran is ordinary wheat bran from which the starch has been washed. This may be done by placing the bran in cheese cloth and soaking and kneading in frequent changes of cold water until the water remains clear; then press and dry. When well washed, such bran has practically no food value.

- 4 cups washed bran
- 2 tablespoonfuls India gum
- 1 tablespoonful cinnamon
- Saccharine to taste

Mix dry ingredients together; add same amount of water as bran. Pat into thin cookies and put in muffin tins greased with mineral oil. Cook until crisp.

Salad Dressing: Mineral oil, also known as paraffin oil, Russian oil, passes through the digestive tract without being altered or assimilated and therefore has no food value. It also acts as an intestinal lubricant and thus helps to prevent constipation.

- Yolks of 2 eggs
- Mineral oil, 2 cups
- Vinegar, 3 teaspoonfuls
- Paprika to taste
- Flavoring
- Add mustard to beaten egg yolks
- Add oil drop by drop until it starts to thicken
- When very thick, add vinegar slowly
- One teaspoonful, twice daily, is not counted as of any food value.

Agar-Agar Jelly: Agar-agar is useful in making jellies and for thickening anything. It is a prepared and imported sea-weed and has no food value.

- 10 grms. agar-agar
- 2000 cc. water
- Saccharine to taste
- Flavoring

Dissolve agar agar in water. Bring to boil and boil 15 minutes. Cool after adding flavoring and saccharine.

Vegetables thrice cooked. The vegetables are cleaned, cut up fine, soaked in cold water, and then strained. They are then transferred to fresh cold water and boiled for five minutes. This water is poured off, replaced by fresh cold water, and the vegetables are again boiled a similar length of time. These changes of water are usually sufficient to remove the carbohydrate. The vegetables which most readily part with their carbohydrate are spinach, celery, cabbage, beet greens, cauliflower.

AN UNUSUAL PARTY

By GENE HARRISON, A.B., R.N.

This little bunch of students green
Should ne'er be heard and seldom seen.
But we're 'most ready to explode,
And would to you our minds unfold.
So please come hear our wee debate,
Then stay and have a bite to ate.

THIS little jingle appeared on our bulletin board not long since, signed "The Prelims." The occasion was their final examination in Psychology, which took the form of platform talks. Some of the subjects were: "Why a Student Should Do the Small Things Well," "Does Training Ever Make a Girl Hard or Bad?" "Are Children Naturally cruel?" "Glimpses of the Life of Florence Nightingale." The question for debate was: "Resolved, that a nurse is never justified in telling an untruth to her patient." The discussion was very heated, and really good, especially when we consider the inexperience of the debaters.

After the judges (Superintendent of Nurses and two Supervisors) had rendered their decision in favor of the negative, the two speakers on the affirmative very pompously presented each of their opponents with a rose bud! Then, as soon as the laughter had sufficiently subsided, the Juniors were asked to sing their class song, the last stanza of which is:

What is the school we love the best?
M. B. S., the M. B. S.
With loyal students thou art blessed,
M. B. S., dear M. B. S.
We are the class of '25!
And we're a bunch of wires live!
For thee we'll work, for thee we'll strive!
M. B. S., dear M. B. S.!

Can't you just tell that the air is "Maryland?" And can't you hear the class room ring? Just as the last line was almost finished, the lights went out. The "oh's" and "ah's!" drowned the noise made by the Prelims gathering in a row by the piano. And as the lights again came on, they began:

What is the school we love the best?

. . .

We are the class of '26!

We are the bunch that never kicks!

Without us they'd be in a fix!

M. B. S., dear M. B. S.!

Next with swaying and swinging and prancing, they sang:

They're nurses born, they're nurses bred,
And when they die they'll be nurses dead!

So it's rah, rah for nurses, nurses!

Rah, rah for nurses, nurses!

Rah, rah for nurses of the M. B. S.!

Then, as the clown of them all tiptoed her way up to the Superintendent of nurses, they sang:

Howdy do, Miss Norberg, howdy do!

Is there anything for you that we can do?

We'll do anything we can,

And stand by you to a man!

Howdy do, Miss Norberg, howdy do!

This ended the programme so far as planned. Juniors, Seniors and Intermediates responded nobly with appropriate yells for the Prelims, and agreed that the youngsters had done something clever by entertaining the school which delayed too long in giving a party for the newcomers. Sandwiches and cocoa were served. The rest of the evening was spent with music and dancing.

The party was considered enough of

a success from both the standpoint of a good time and the benefit derived from the opportunity to speak before an audience, that other final examinations are to take the same form. We feel such

a programme gives our students valuable drill in public speaking, tells more about their ability than a written examination, makes little more work for the instructor,—and gives every one a good time.

REACHING THE PROSPECTIVE NURSE

BY EDITH HURLEY, M.A., R.N.

FIRST of all, let me say that the "open sesame" to halls of learning is emphasis on the fact that you intend to stress high-school education as the minimum foundation for any career. Some hospital representatives have made the mistake of suggesting a school of nursing as an alternative to continuing in high school. School authorities do not approve of that approach. One principal stated frankly that letters making a plea for vocational training after one or two years of high school were thrown into the waste basket. Another said, "Why should we admit vocational speakers to our schools to call away our students, when we often have to fight tooth and nail to keep them here?" Urging high school education, always wins the cooperation of the school authorities. After my talks, principals have often recommended most heartily the nursing profession as a career for their girls to follow, and they have suggested valuable points to bring out when meeting the girls. For instance, one of these helpful principals told me that he was convinced many girls hesitated to enter a training school as they did not understand the relation of the nurse to the male patient. Apparently nothing was known about the

place of the orderly in the modern hospital. I now make it a point to give out this information.

The general public knows very little of the good school of nursing as it exists today, and the minds of parents, particularly, are filled with impressions of twelve-hour duty, endless drudgery, and such severe demands on their daughters' vitality that only those of unusual physical strength and endurance can survive. Correct these false impressions by mentioning how the introduction of ward maids and helpers in many of the larger hospitals has relieved the student nurse of much of the cleaning and routine work, and consequently made it possible for her to be given the theory and practical experience in the care of the sick in a shorter period of time. This leads up to a few words about the abolition of ten or twelve-hour duty, and the establishment of the present eight or nine-hour day. Mention should be made of the half days and vacation periods that are given to the student nurse and also of the credit of from six to nine months that is given to the college graduate who enters training.

When it comes to a discussion of the type of girl who is physically best fitted for the nursing profession, I tell my

audience that any young woman of general good health is eligible, and also that we want steel in the nursing profession, rather than iron, as keenness, flexibility, and resiliency are preferable to solidity and mere weight. I cite a nurse's training as a perfect example of metabolism, it builds up the girl who may be underweight and it has the tendency to diminish the superfluous avoirdupois of the girl who sometimes prays, "O, that this too, too solid flesh would melt." As a final argument in behalf of the beneficial results of regular hours, combined physical and mental exercise, and the spiritual satisfaction derived from the performance of interesting duties and useful work, I cite the well-developed, well-poised Senior in comparison with the immature, self-conscious Probationer.

Many girls say that after their parents have given them a high school or college education, they have felt it necessary to begin to earn their own living and not to impose the further financial burden of a course in a school of nursing. When they are told that in many hospitals, they are given this training not only with no expense to themselves, but even with a "pin-money" allowance, a new interest is aroused. Stress the fact that in a hospital providing adequate clinical and other educational facilities, they are given professional training for which students in other professions usually pay several hundred dollars a year.

After the removal of these stumbling blocks it is a simple matter to arouse interest in this great humanitarian profession. You can show how a course of training provides the best possible ex-

perience for the successful discharge of the duties of a wife and mother; if she had considered teaching, then point out how the public health nurse is a teacher of far-reaching influence and also show the need of teachers in our schools of nursing. Many girls will tell you they want to be social service workers. Advise them to obtain some hospital experience, as many of their contacts will be made with patients, and social workers tell us that at least 60 per cent. of their problems are health problems. When the various branches of the nursing profession have been mentioned, show them how the better schools of nursing fit them to fill these places adequately.

Impress upon your audience that personal interest will be taken in each one of them by those in charge of their professional training, and that their efforts to be a credit to their school will not pass unnoticed. If they are particularly interested in some special field of nursing, opportunities will often be given them for further study in that field. Scholarships for special work are awarded by competitive examination in many of the schools of nursing, and I happen to know of one scholarship that is given "to the nurse with the best record for kindness and proficiency in the actual duties of bedside nursing"; the superintendent of nurses in the school awarding that scholarship, recognizing that the best student is not always the best nurse says, "I have always felt particularly proud of the ——— prize because it gives us an opportunity to reward the girl who is more nurse than student, and we all know that there are many splendid women of this type."

When all is said and done, to cultivate kindness is a great part of the business of life.

A direct talk of fifteen or twenty minutes holds the attention of the audience and frequently provokes interesting questions to be answered with a few additional moments' time. Young America of today does not maintain a bright and animated expression of interest (for politeness' sake) when it is frankly bored; it wriggles in its seat—and yawns. Stop at the first symptoms of restlessness. But these talks seem well

worth while when girls tell you afterwards that "somehow, they had never thought of nursing before, but now they are going to be nurses" (*no question about it*); and when teachers and parents in the audience say they wish some one had given them vocational guidance during their school days. The presentation of our profession in the schools of today fulfills a three-fold purpose, by giving nursing much needed publicity, by enlightening the public, and by attracting to our hospitals many valuable young women.

QUESTIONS FOR PROSPECTIVE STUDENT NURSES

DO you know:

That our schools for nurses can admit at least 25,000 students this year?

That there are 1700 schools for nurses in this country?

That about 13 schools for nurses are connected with Universities and that some of them provide a five-year course leading to a diploma in nursing and a Bachelor of Science degree?

That although many state laws make only one year of high school work a prerequisite for nursing, every prospective nurse should be ambitious to exceed this requirement?

That many schools now give credit for college work, in some instances reducing the course from three years to two years and three months?

That no other professional education can be obtained at so small a financial outlay?

That the majority of schools not only

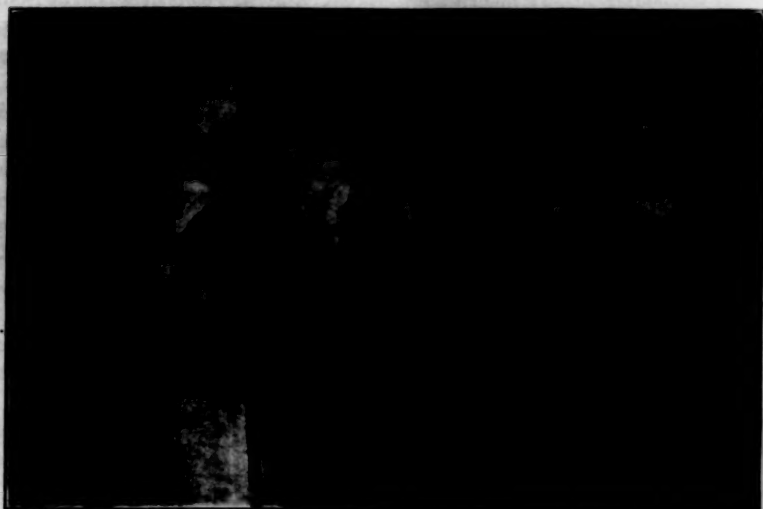
provide maintenance during the course but also provide uniforms and textbooks or an equivalent allowance?

That good schools for nurses give an organized course in the medical and surgical nursing of men, women, and children; they also give obstetrics and an increasing number provide courses in tuberculosis, communicable and mental diseases, and in public health nursing?

That good schools have reduced non-educational routine to a minimum?

That good schools have established the eight-hour day and have a forty-eight hour week?

That before entering a school you should be sure that its graduates are eligible for registration in the State; that they are eligible for enrollment in the American Red Cross, which provides the reserve for the Federal Nursing services; that well equipped class rooms are available for its teaching; and that the school



Courtesy Central Council, Nursing Education.

CLASS IN BANDAGING



Courtesy Central Council, Nursing Education.

CLASS IN BACTERIOLOGY

Well Organized Teaching in Properly Equipped Class Rooms is the Hall-mark of a Good School for Nurses

provides reasonable housing facilities for its students?

For names of schools and specific information apply to the State Boards of Nurse Examiners (see Official Directory) or to the following:

Central Council of Nursing Education, 116 South Michigan Avenue, Chicago, Ill.; Eastern Council of Nursing Education, 156 Fifth Avenue, New York City; Council for Nursing Education of

South Eastern Pennsylvania, 221 South 18th St., Philadelphia, Pa.; Committee for Advancement of Nursing Education, 2157 Euclid Avenue, Cleveland, Ohio.

That a List of Schools Accredited by State Boards of Nurse Examiners (\$1.04) and a pamphlet "Opportunities in the Field of Nursing" (15 cents) may be obtained from the National League of Nursing Education, 370 Seventh Avenue, New York City.

GREETINGS FROM HEADQUARTERS TO THE 15,000 GRADUATES OF 1923

ON the fifteenth floor of the Penn Terminal Building, at 370 Seventh Ave., New York, the three National Nursing Organizations have a national Nursing Headquarters. An invitation is extended to you to visit that headquarters.

Do you know that Headquarters is maintained for you? That you have a responsibility towards it?

Do you know that the reputation of the future of nursing depends on you?

Do you know that the best asset nursing can have is a good nurse?

Do you want to know what the National Nursing Organizations stand for?

Do you want to know how the National Nursing Headquarters can serve you?

I.

The National League of Nursing Education was the first national organization of nurses in the country. It was organized in 1893. Its main function is to define and maintain standards of education in schools of nursing.

At League Headquarters there is an executive secretary, whose duty it is to keep in touch with nursing education throughout the country, in order that information may be made available to you on all questions relating to this.

A Placement Bureau is maintained for your benefit. You are invited when desiring a teaching or executive position to write to the Secretary, who will help you in every way possible to fit into the place you are qualified to fill.

A number of publications written on nursing subjects are on sale at this office and will be sent to you if you request them. A list of these publications you will find on pages 655, 656 of this *Journal*.

II.

The American Nurses' Association was organized by the National League of Nursing Education in 1897.

Its membership is 41,419, the basis of membership being by State and Territorial Associations of nurses.

The graduates of accredited training

schools of today are the members of the American Nurses' Association of tomorrow.

The American Journal of Nursing is owned by the American Nurses' Association and is its official organ.

The Isabel Hampton Robb Memorial Fund grants a number of scholarships each year to graduate nurses who desire to qualify for special branches of nursing.

The Nurses' Relief Fund has been established for helping its disabled and sick members.

The American Nurses' Association is working towards a uniform standard of registration for nurses.

The American Nurses' Association is equally responsible for the conduct of the Placement Bureau at Headquarters.

The Association has a representative at Headquarters to assist in further developing the activities of the Association.

III.

The National Organization for Public Health Nursing was organized in 1912 to meet the need for a central advisory

body for the 3,000 public health nurses then working in the United States. There are now 12,000 public health nurses and the need for such an adviser is even greater.

Our aim is to insure to the public the best kind of public health nursing service.

Through our staff at headquarters, our Committees and Sections, our participation in the National Health Library, and our monthly magazine "The Public Health Nurse," we offer you information and help on all matters pertaining to public health nursing. You may consult us by letter, telephone or personal interview and we will tell you about public health nursing,—its scope, opportunities, and preparation. We will help you to find the right piece of work and then help you to do it in the best way.

EFFIE J. TAYLOR,
Executive Secretary, N.L.N.E.

AGNES G. DEANS,
Secretary, A.N.A.

ANNE STEVENS,
Director, N.O.P.H.N.

LIST OF PUBLICATIONS, PORTRAITS, SLIDES, ETC., FOR SALE AND DISTRIBUTED BY THE NATIONAL LEAGUE OF NURSING EDUCATION

Standard Curriculum for Schools of Nursing.....	\$1.50
The Relation of Hospital and Training School Organization to the Curriculum.....	
.....M. Adelaide Nutting, R.N.	.20
Southern Economic Basis for Training Schools for Nurses.....	M. Adelaide Nutting, R.N. .15
Report of the Committee on Nursing Education.....	Josephine Goldmark .15
Report of Committee on Nursing Education; Critique and Review.....	
.....Richard Olding Beard, M.D.	.25
The University Education of the Nurse.....	Richard Olding Beard, M.D. .10
The Making of History in Nursing Education.....	Richard Olding Beard, M.D. .10
The Modern Education of Women for the Profession of Nursing.....	
.....Richard Olding Beard, M.D.	.10
A Plan for Centralizing Schools of Nursing.....	Annie W. Goodrich, R.N. .10
The Objective of a Nurse in a Democracy.....	Annie W. Goodrich, R.N. .05
Preliminary Report of University Schools of Nursing.....	.20
The Case for Shorter Hours in Schools of Nursing.....	.20
Opportunities in the Field of Nursing.....	Isabel M. Stewart, R.N. .15
(100 copies or over, 10 cents each)	
Duties of Nurses on the Private Ward.....	Effie J. Taylor, R.N. .05

The Place of the Teaching Supervisor in Our Educational Programme.....	S. Lillian Clayton, R.N.	.05
Practical Considerations Relating to the Centralization of the Teaching in Schools of Nursing.....	Harriet M. Gillett, R.N.	.10
Hospital and Training School Administration.....	Amy M. Hilliard, R.N.	.25
Education for Tuberculosis for Student Nurses.....	Louise M. Powell, R.N.	.05
Modern Facts and Phases of Tuberculosis.....	David Alexander Stewart, M.D.	.10
Nursing and Health of the Future.....	G. G. Farnell, M.D.	.05
Report on the Teaching of Dietetics to Student Nurses.....	Fisher	.10
Positive Health for Nurses.....	Caroline Hodger, M.D.	.05
The Relation of a School of Nursing to a Hospital.....	Isabel W. Lowman	.05
The Out-Patient Department as a Field for Nursing Education.....	Mary B. Hubner, R.N., A.M.	.05
The Abiding and Spiritual Aspects of Nursing.....	Rt. Rev. Wilson R. Stearley	.05
Habits and Skills.....	Maud B. Muse, R.N.	.05
The Alumnus Association and Its Duty to the Hospital.....	Clara Stahley, R.N.	.05
The Basis of Professional Ethics for Nurses.....	Dr. William H. Kilpatrick	.20
List of Accredited Training Schools for Nurses with Other Important Data (1922)....		1.00

PORTRAITS, ETC.

Florence Nightingale—15x20" Sepia (Coke Head).....	5.00
15x20" Sepia Sitting (Showing Home in her earlier days).....	5.00
6x 9" Sepia (Coke Head).....	1.00
6x 9" Sepia Sitting (Showing Home in her earlier days).....	1.00
Jane A. Delano—15x20" Sepia Sitting at desk.....	5.00
7x 9" Gray, Standing in Uniform.....	1.50
6x 9" Sepia, Sitting at desk.....	1.00
Post Cards, Standing in Uniform.....	.25
Linda Richards—8x10".....	5.00
Sophia F. Palmer—11x14" Gray or Sepia.....	5.25
7x 9" Tiffany Print Sepia.....	4.25
7x 9" Tiffany Print Gray.....	3.25
Isabel Hampton Robb—10x14".....	1.50

CALENDARS

Florence Nightingale Calendar, 1921.....	.75
Booklet, "Early Leaders in American Nursing, 1922.....	.35
Leaders in American Nursing, 1923.....	1.00

SLIDES

Set of Lantern Slides on the History of Nursing—188 in number, per Slide, Standard Size.....	.50
Rental, by Set.....	15.00
Life of Florence Nightingale, Set.....	30.00
Rental, by Set.....	5.00
Reports of the National League of Nursing Education, odd volumes, each.....	.50

New graduates who plan to enter private nursing are reminded of the importance of choosing a registry that is ethically conducted, in order that they may not be exploited by unscrupulous people. Where an official or central registry has been established by a nursing association it should be supported in the interest of the individual and of the group. Such registries have the interest of both patient and nurse sincerely at heart.

Health for School Children, the exceedingly valuable report of the Advisory Committee on Health Education of the National Child Health Council may be obtained, at ten cents per copy, from the Bureau of Education, Department of the Interior, Washington, D. C. The 75 pages are packed with authoritative and well organized information on the scope and administration of school health work.

EDITORIALS

AN ENDOWMENT OF A HALF MILLION DOLLARS

RARELY there comes an opportunity for a veritable paean of praise, an outpouring of gratitude from heart to heart. Such an opportunity comes to the nursing profession through the gift of one-half million of dollars by Mrs. Chester K. Bolton to the new School of Nursing at Western Reserve University. The gift comes as the culmination of many years of devotion to nursing as a civic and a national service although Mrs. Bolton is, happily, yet a young woman.

As a member of the Board of the Visiting Nurse Association of Cleveland, she early became truly consecrated to the ideal of securing suitable care for all who are sick by a wise distribution of nurses. This ideal crystalized in the Cleveland Nursing Center where are sheltered, under the hospitably spreading eaves of the homestead of Mrs. Bolton, now given over wholly to this service, all of the non-municipal nursing activities of that city.

On the Board of the National Organization for Public Health Nursing, Mrs. Bolton has rendered a service that can in no sense be reckoned only in terms of financial aid, large though her gifts have been. With this rich background of experience and of thoughtful interest in local and national health activities, it is not surprising that her nursing interests became all inclusive and she came to see nursing education as the foundation on which our structure must rest. Our entry into the Great War brought to this clear thinker an early realization of the need for supplementing our nurs-

ing forces. Through her efforts, perhaps more than through those of any one other person, Miss Goodrich's dream of an Army School of Nursing became a reality. And now comes the announcement of this great gift which immediately calls to mind other notable gifts, those of Florence Nightingale and of Mrs. Helen Hartley Jenkins—the former to establish the first school for nurses in the world at St. Thomas Hospital, London, and the latter a half century later, to endow the Department of Nursing and Health at Teachers College.

For fifty years the schools for nurses in this country have been laboring to make bricks without straw, to maintain educational institutions without visible means of support. The Report of the Committee on Nursing and Nursing Education has clearly shown our educational weaknesses. This munificent gift, like a gorgeous rainbow at the close of a gray day, will give each weary observer hope. The directors of our schools will rejoice with the Cleveland School. They will straighten their shoulders and adjust their burdens a little more firmly believing that, in time, our schools will generally be given the financial support necessary if they are to worthily prepare successive generations of young women to practice the art that concerns every family in the world. Mrs. Bolton has made an even greater gift than she knows. She has renewed our faith in a righteous cause.

COMMENCEMENT

WHAT a mosaic of recollection the word brings to most of us! The mind lets go a thousand things, but not

the precious memories of the few outstanding events that mark our paths. Some there are who have grown blasé. Some defrauded ones there may be who know not the commencement thrill because their schools failed to make graduation an occasion for joyous remembrance.

The exercises at which the long coveted diplomas are presented should be as dignified and impressive as the individual school can make them. The setting may be chapel, auditorium, amphitheatre, bough-decked tent, sun-flooded lawn, or artificially lighted terrace, but the ends to be kept in mind are the achievement of inspiration, dignity and beauty. To those who believe that nurses should press on and ever on in the pursuit of knowledge, an academic procession with cap-and-gowned nurses taking their places in line with students of other schools in a University is a moving sight. Profoundly impressive, too, are Community Commencement exercises such as those held in Detroit, Rochester, and Denver, for there expression is given to our mutuality of aim and to the collective importance of nurses in our democracy. Cold, indeed, is the person who can gaze unmoved on such solid ranks of uniformed, eager, starry-eyed youth!

Clustering around commencement day we find festivities that yearly become comparable to those with which our colleges celebrate the completion of the course. Class days with tree or ivy planting are not unknown, alumnae associations delight not only to entertain the new class but to make it a time of happy reunion, and undergraduate classes play hostess at many an unique

entertainment. The dances, theatre parties, and other festivities give graduates opportunity to offer their services for relief duty since the comfort of patients may never be sacrificed. Paganry is coming into its own as a beautifully symbolic way of celebrating commencement time, and of epitomizing the achievements of the past. Our frontispiece is a scene from "The Lady of the Lamp" written for and presented by a relatively small but ambitious school last year in coöperation with various community groups. Onlookers cannot fail to appreciate the rich heritage of the modern nurse when Roman matrons, monks and nuns, crusaders, and finally Florence Nightingale herself are visualized before them. They cannot fail to grasp the significance of the contribution of nurses to our national life when, in mass formation, appear Red Cross, Army, Navy, public health and all the other types of nurses of today.

We like the custom which prevails in some schools of presenting the school pins before the formal exercises. Some of those whose privilege it has been to receive pins in this way will tell you that this exercise may be a veritable benediction; the "Well done" of the director of the school who has been teacher, guide, philosopher, and friend to her children. Happy indeed is the nurse whose school, having given her a sure foundation for her life work, triumphantly sends her forth to aid in pushing back the night of wretchedness due to ignorance and disease. We congratulate the nurses of 1923 who, having completed the course, are entering a profession of worldwide opportunity.

"I'D HATE TO BE A JUST-A!"

A little child and her mother were watching wild birds come down to a window feeding shelf for the food thoughtfully scattered there. Following a gorgeous cardinal came an undistinguished looking little bird in his dull winter coat. To the query of the child, "What bird is that?" the mother replied "Just a white throat"—The child, after some thought, remarked, "Mother, I'd hate to be a just-a!"

There are times when one feels that we humans are much more concerned with pushing each other down into the just-a class than with the upgrading of society. We are frequently guilty of describing individuals as just-a this or just-a that, thus displaying a distinctly negative attitude of mind. What to our mind is even more deplorable is that nurses sometimes apply the term to themselves. More than once we have heard the answer, "Oh, I'm just a nurse!" or, even more frequently, "I'm just a private duty nurse!" Such statements imply lack of self respect and if we do not respect ourselves there is no good reason why we should expect respect from others. The woman who feels she is a "just-a" in nursing is not measuring up to her full powers. With such an attitude of mind she cannot do credit to herself nor to the profession to which she belongs. Women who are not proud to be nurses have no rightful place in the profession.

Many, many types of ability are needed in nursing. We would urge young women who are graduating this year to make definite decisions as to the next step in their progress. If private duty seems attractive, choose it delib-

erately, don't permit yourselves merely to drift into it.

If a head nurseship seems alluring, choose it because administrative work offers sound opportunities for personal development and for constructive service. Don't accept it merely because it is convenient and you dislike change. If the open door of public health work lures you—enter with open eyes. Make definite decisions based on your preparation, your abilities, and your desires. Remember that you are entering an honorable profession of world-wide opportunity. If you have had a good basic training and possess the will to do and to serve, it offers durable and ever increasing satisfaction to you. Don't drift,—Choose! You need not be a "just-a!"

THE LURE OF NURSING¹

THE charm, the fascination, the lure, the steady grip and pull and, with all,—the satisfaction—of nursing are so much a part of nurses' lives that they rarely put their feeling into words, but probationers, nurses still in the making, are wholesomely and enthusiastically vocal. From a pile of manuscript written by probationers in a number of hospitals comes a wave of stimulating comment. Through jokes at themselves, incidents about patients, surprise over hospital ways, discussion of study and class work, tales of gay boarding school times off duty, there runs a thrill of enthusiasm which, like an irresistible current, bears them forward.

With eyes opening to the real meaning of life, contrasting for the first time all

¹ Written, upon request, by Miss Frances Maltby, Executive Secretary of the Council of Nursing for Southeastern Pennsylvania.

sorts and conditions of humanity, rich and poor, cultured and ignorant, weak and strong, but all alike dependent in some measure upon their ministrations, understanding dawns. They write "The people are the big interest in nursing to me" and "I love the patients, they have taught me much," and "My sense of values is changed. What I get is less important, what I give is more important." And now they receive in order to give. The desire, the act, the response make a divine cycle.

From the patients flows to the nurse, in some sort or another, what Arthur Guiterman expressed years ago when he wrote "In The Hospital,"

Because, even here, in this mansion of woe,
Where creep the dull hours, leaden shod,
Compassion and tenderness aid me
I know—there is God.

That same feeling belonged to the little girl who said, "God is the very best person in all the world, isn't He? even better than a nurse."

And what reaction comes from a neighborhood? One would like to feel that the spirit in the following incident is universal, for says one of the missives, "As I stepped into the street where small boys were flinging stones at the passers, one of them shouted, 'Oh, don't hit her. She's not a woman, she's a nurse!'"

It is sad to see those who have always wanted to be nurses and who, because of circumstances or opposition have never had the chance. "My mother wouldn't let me," says one woman, adding with brimming eyes, "and now it's too late, I'm over thirty-five." And then comes to mind "Milestones," that play of Arnold Bennett's, in which each one that let himself be guided by tradition came to naught, while those who

pressed forward accomplished, for every generation must follow its own star. For the sake of those who hesitate we would add yet another testimonial from the accumulation before us: "And while I am only a probationer, I know the future holds *something worth while.*"

RESIGNATION OF MISS DOCK FROM THE JOURNAL STAFF

IT is with great regret that we announce the resignation of Lavinia L. Dock from the position of editor of the Foreign Department of the JOURNAL.

When the magazine made its first appearance, in October, 1900, one of the departments was devoted to "Foreign News," but no editor's name was given in connection with it. In the second issue, November, 1900, the name of the editor appeared, Lavinia L. Dock. From that day to this, a period of more than twenty-two years, Miss Dock has edited that department.

Some of the other departments have been carried first by one editor, then by another, and of almost any other department it might be said that any one of several people could edit it well. But Miss Dock stood alone. At the time the JOURNAL was started, no one else had her knowledge of foreign affairs, and it is probably true today that no one else knows so thoroughly the condition of nursing education and of nursing organizations, the world over. She has made several trips abroad, and has travelled from country to country making special studies of hospitals and training schools. Our older subscribers will remember the interesting series of articles, well illustrated, which she contributed to our pages during those trips. She was for years secretary of the

International Council of Nurses, a position which brought her closely in touch with the leading women of our profession in other lands. Miss Dock is also a linguist, reading several languages beside her own.

The situation is now somewhat changed. The World War has given foreign nursing work a new aspect,—many of our own women have worked in other countries and are familiar with conditions abroad; Miss Dock has resigned her office of Honorary Secretary of the International Council of Nurses; home cares demand more of her time. So when she begged, for the second and third time, to be released as editor of the Foreign Department, the editors and the President of the JOURNAL Board felt that her request should be granted.

Miss Dock has been an ideal staff member. Although her material has been so important, she has been willing at any time to have it adjusted to the needs of the magazine as a whole, when some change seemed necessary; she has been prompt in sending material and scrupulously exact in her preparation of copy. Although she has seldom had access to a typewriter, her handwritten pages have been beautifully clear, with no question as to spelling, punctuation, or proper names.

The editors feel that it would be impossible to fill Miss Dock's place and as there is now no limit to the field of the activities of American nurses, the department, as such, will be discontinued for a time, though material on foreign affairs will be welcomed and given space.

Miss Dock has promised to be ready to respond to any appeal we may make to her, and we are sure our readers will

join us in regret at her departure from our staff and in the gratitude and good wishes we send her.

A BACKWARD STEP IN MISSOURI

A GAIN the shortsighted forces of disintegration and reaction have won out and the registration act passed only two years ago, of which Missouri nurses were so justly proud, has been repealed. Under the new law applicants for registration must have acquired a general education, "substantially equivalent to that obtained by the completion of a common or grammar school course of study," and little provision has been made for administration of the law and for assistance to the schools.

We believe that educated young women will so consistently shun schools that accept this low entrance requirement, that the sum total of students in such schools will not be appreciably increased and the law will thus defeat its own ends. The demand for low entrance requirements usually comes from selfish individuals or from institutions that regard student nurses as a cheap labor supply rather than as students preparing for definite responsibilities in a community. Lowered entrance requirements are not an inducement to thoughtful young women of the type demanded by those who employ graduate nurses.

This action by the Missouri legislature and equally subversive tendencies in some of the other states confirm us in our belief that, important though it is for us to continue our efforts to secure reasonable and uniform legislation, prospective students need some surer index of the quality of schools for nurses than has yet been offered. Such an index could be provided by grading schools

for nurses just as medical schools have been graded and as hospitals have been graded in order that internes may not unwittingly waste time in inferior institutions.

The quality of a school for nurses can be determined at the present time by thoughtful inquiry. It will be more readily determined when the schools have been graded in accord with their facilities for teaching and the quality of the instruction offered. We cannot too often repeat that the nursing service of a hospital and its school for nurses are not identical. We believe the schools in Missouri which see this fact clearly and which adhere to worthy standards will suffer less from this new legislation than those which have not learned to make the distinction.

Prospective students are looking for and are determined to find, schools which will really give them an education in nursing. They have no intention of being exploited even in the name of philanthropy. We deplore Missouri's lowered requirements, but we are in no wise discouraged.

CENTRALIZATION OF NURSING EDUCATION

HOW shall the insistent demands for more and better teaching in schools for nurses be met? This question forms the basis for much of the discussion at our meetings. The burdens laid upon the directors of schools for nurses are indeed heavy. Centralization of schools is now being offered as a panacea for many ills, although the phrase has never been clearly defined by any authoritative body. In many sections of the country a central school is held to be an organization by means of

which several schools for nurses are brought into a group under some form of coöperative control, for instruction in the work of the preliminary course. In others it is held to be the union of several hospital schools under the educational direction of a university and with students matriculating in the university. It is sometimes assumed to be a concentration of teaching under High School or Junior College jurisdiction and in coöperation with local nursing interests.

The consolidation or amalgamation of classes from several schools, which is the basic idea in all these plans, seems to offer much in the way of stimulation of the component groups. It offers at one and the same time the hope of certain economies and of improvement in the quality of the teaching. It tends to give form and substance to schools whose identities have been submerged in the hospitals. With little financial support available and no opportunity for university connection, it is not surprising that some nursing schools have seized upon what they considered the next best plan and have sought affiliation with high schools. Many high school teachers are perfectly competent to give some of the instruction we require for our students. Not infrequently high school laboratories offer the only hope of suitable equipment for science teaching, especially in the smaller communities. The high schools are usually generously coöperative. There is a danger here, however, which is not always appreciated. The high school has its own distinct function, but that function is not professional education of any type, and nursing schools will be seriously misled if they turn their professional work over to high schools.

Individual subjects may be taught by high school teachers, and high school laboratories used for such subjects as Chemistry and Dietetics where other facilities are not available, but this should be considered a temporary and special adjustment. The control and direction of nursing education should not be placed in the hands of the high school. There are those who still believe that nursing is not a profession. If we wish to obtain a generally recognized professional status, we must safeguard the foundation on which we build. That foundation should be built on, and not in, the high school.

Any discussion of teaching necessitates a discussion of finance. When funds are so difficult to obtain for nursing education, it would seem a happy solution to secure assistance from the Boards of Vocational Education in the various states. The funds of the Federal and State Boards are not available for education above high school grade and control must be centered in the high school which gives the training. Acceptance of such assistance, therefore, while seeming to offer an easy way out, would automatically grade the work below that of a desirable professional level and take it out of the hands of the nursing schools in whole or in part. Many of our difficulties today are due to non-educational traditions. It would be much better to pay for the outside assistance we need or even to get on a little longer as we have been doing, rather than take a wrong turn here which would hamper future progress.

Consolidation is coming—there is no doubt about it, but if university affiliation is not available better far be independent. Consolidated schools such as

we have in Philadelphia and Utica can carry the student through the preparatory course and, we hope, ultimately through the entire training. Such schools will be ready for affiliation with a Junior College or University if opportunity comes. Until that time, they operate as free and independent professional schools.

Let us think clearly and build wisely that we may not establish precedents that will hamper our successors. Let us avoid alliances that tend to hamper the best development of our schools and keep in mind the objective of a true profession founded on knowledge and animated by a genuine spirit of social service.

JOURNALISTIC COÖPERATION

THE *Pictorial Review* announces that this month's issue exceeds that of any other magazine in the world and that two and a half million copies will be printed. Space in such a magazine is exceedingly valuable as is proven by the enormous sums paid for its advertising space.

Through our National Headquarters the editors of *Pictorial Review* became interested in the ever growing demand for nurses and have generously coöperated in disseminating information on nursing as a vital element in our national life. When interviewed, they almost instantly grasped the scope and significance of nursing and its resultant satisfactions to those who really prepare themselves for service. In the June issue will appear a concise little article called "Wanted, 50,000 Girls for a Great Opportunity." Says Marie Sellers, Home Economics Editor, "I wish this might have been played up even more

strongly than it is, but it had to be fitted in wherever we could find space for it."

The *Pictorial* staff has strengthened our belief in the generosity and broad-mindedness of journalists. We have had friendly relations with many of that versatile guild and it has been our experience that they have as genuine a desire "to serve" in their own way as nurses have, but they are busy people

who cannot spend time and will not spend space on hazy ill-considered copy or plans without definite point and timeliness.

Nursing is a national and a community responsibility. It is encouraging to find the lay press increasingly cordial and cooperative in circulating information about the "art that concerns every family in the world."

AN APPEAL FROM RUSSIA AND FOR RUSSIA

Last year an appeal from Mlle. A. V. Romanoff to the American Nurses' Association for the suffering nurses of Russia was answered by many state associations of nurses throughout the country. The contributions received to date amount to over \$600. This amount has just been turned over to American Medical Aid for Russia through the Medical Division of the American Friends Service Committee, for the relief of nurses, through supplementary feeding in hospitals and training schools. This appeal is now renewed on the basis of the report of Dr. Henry O. Eversole of the Russian Commission of the National Information Bureau.

"Russian doctors and nurses," says Doctor Eversole, "as a result of their self-sacrificing efforts to maintain a high standard of medical work, have reached the point of exhaustion. It is certain that at least 75 per cent of these men and women are existing on incomes inadequate for even the bare necessities of food and clothing. Great numbers of doctors and nurses have died in fighting epidemics, others have contracted tuberculosis, and those who remain are so weakened by years of privation and over-work that they have slight resistance to disease. All achievement is being paid for in terms of undermined health and death among medical personnel."

Hospital conditions, according to the report, are almost impossible for us to visualize from our vantage point of comfortable isolation. Can you imagine a 500-bed hospital with two hypodermic syringes, three thermometers, two hot-water bags and one ice-cap? Add to this picture a temperature little above freezing through the long Russian winter, a hot water supply from samovars and tea-kettles, and a complete lack of soap. In such hospitals as this the nurses of Russia are bravely carrying on.

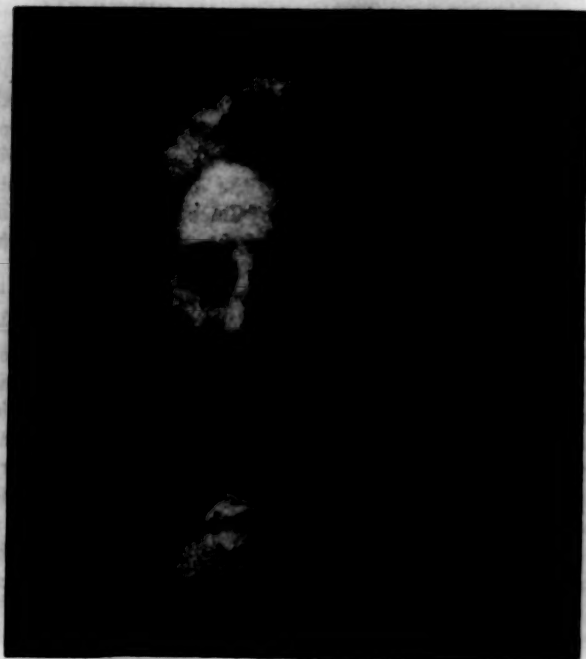
The superintendent of nurses in a Moscow training school, where excellent standards are maintained, is quoted as saying: "My greatest difficulty with the nurses is that they often faint on duty. Unless they have friends on the outside to send them food, we often find that by the end of the month they have nothing to eat. In our hospitals we have been able to give them hot water for their tea, but when they are hungry we can expect little from them, however hard they try."

A month's supplementary feeding for one of these nurses through the American Friends Service Committee costs about eighty cents. Ten dollars will see her through the coming year. The fund of ten thousand dollars, for which American Medical Aid for Russia appeals, will maintain the health and strength of a thousand of the best trained nurses, and through them will relieve untold suffering. Certainly the nurses of America will answer to the limit of their ability this request to act as "friends on the outside" for these brave women.

The three National Nursing Organizations have been invited to participate and are cooperating by recommending representative nurses to serve on a Committee which will assist the American Medical Aid for Russia to convey the appeal to American Nurses.

Hereafter, all contributions for the aid of Russian nurses should be made payable to the American Medical Aid for Russia, and sent to Mrs. Henry Villard, Chairman, 103 Park Avenue, New York.

WHO'S WHO IN THE NURSING WORLD



XXI. M. HELENA McMILLAN, B.A., R.N.

BIRTHPLACE: Montreal, Canada. **PARENTAGE:** Canadian. **PRELIMINARY EDUCATION:** Private schools. **COLLEGE:** McGill University, B.A., 1891. **PROFESSIONAL EDUCATION:** Illinois Training School for Nurses, Chicago, class of 1894. **POSTGRADUATE WORK:** Henry Street Settlement District Nursing, 1902. **POSITIONS HELD:** Lady Superintendent, Kingston General Hospital, Kingston, Canada, 1895 to 1897. Organized the School of Nursing, Lakeside Hospital, Cleveland, Ohio, and first Principal, 1897 to 1902. Organized the School of Nurs-

ing, Presbyterian Hospital, Chicago, and first Principal, 1903 to the present time. **AUTHOR OF:** Various articles and addresses on nursing. **OFFICES HELD:** President, five times, of the Illinois State Association; organizer and first President, Cleveland Graduate Nurses' Association; former secretary National League of Nursing Education; former treasurer, National League of Nursing Education. Member of State and National Committees American Red Cross. **PRESENT ADDRESS:** The Presbyterian Hospital, Chicago, Ill.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., DEPARTMENT EDITOR

NURSING EDUCATION IN CHINA

By ANNA C. JAMMER, R.N.

CHINA is a land of magnificent distances, few railroads, long roads, and great rivers. With a map before you, planning your itinerary, it is difficult to realize that the United States can be placed in China and still leave room enough for Mexico and Canada. The distance from Peking to Shanghai, or from Peking to Hankow and Changsha, or from Shanghai to Canton does not appear long. One may be like the Englishman who thought he could dine in New York and breakfast in San Francisco. It is possible to go to Shanghai by rail, touching at Tientsin and Nanking, or by rail to Hankow and from there by steamer on the Yangtze River. I wanted very much to go the latter way, but was advised not to, owing to the trouble with bandits and wandering troops of soldiers. I found out later that it was safe, but I feared as I was traveling alone and with no knowledge of the language I might meet with some trouble. I shall never cease to regret this, not only because the trip is most interesting, but because I could not go to Changsha where the Hunan-Yale Medical College and Hospital are located. After seeing the work at the Peking Union Medical College I was particularly anxious to see what is being done at Changsha and to meet Miss Gage, Superintendent of Nurses, who has been an active worker and nurse educator in China for some years, and who ranks among the pioneers in

establishing the Nurses' Association of China of which she was president in 1912. The Hunan-Yale College is one of the four important medical colleges in China where Chinese doctors and nurses are being trained for work in the provinces.

On the journey from Peking to Shanghai I was very much impressed by the degree of cultivation going on although it was winter and the land was dry and the streams in the north frozen. The farmers were at work, and every inch of land was under cultivation. I did not see farming machines or horses, it was all done by man and woman power. Here and there the ox is the burden carrier, but not often; men and women carry heavy loads or are harnessed to a heavy cart with large iron studded wheels and pull and push large loads. Man-power is cheap and plentiful, and when one thinks of the famine year, one realizes the importance of making the soil yield. The farmers live in villages which are quite numerous, and village life in China is a community life, all sharing together in a very democratic way. (See "Village Life in China.") As I gazed out of the car window I could not help looking at it from the public health standpoint and trying to visualize the public health nurse in village work, perhaps making her rounds from village to village in a sedan chair, or even in an ox-cart. It is certainly a fertile field for public health work, and

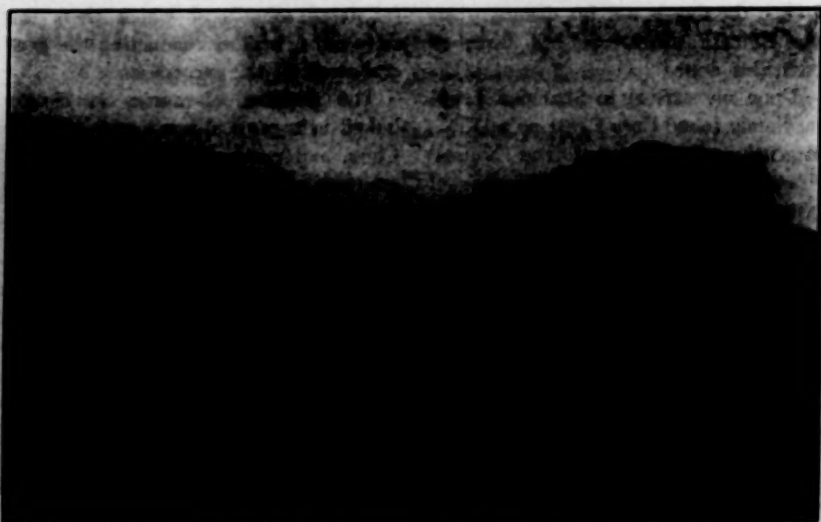
I hope the day is not far distant when the Chinese themselves will want to have this done.

Upon my arrival in Shanghai I immediately found Cora E. Simpson, R.N., Executive Secretary of the Nurses' Association of China, and Director of Nursing Education in China. The headquarters of the association is in Shanghai at 10 Quinman Gardens. I had the privilege of carrying with me greetings from the Presidents of the American Nurses' Association and the National League of Nursing Education to the President of the Nurses' Association of China, Eva E. Gregg. Miss Gregg is the superintendent of nurses of the Isabella Fisher Memorial Hospital at Tientsin, and at this time was on furlough in the United States. I, therefore, presented my letters to the Executive Secretary, and in return carried the greetings of the Nurses' Association of China to the presidents of our national organizations.

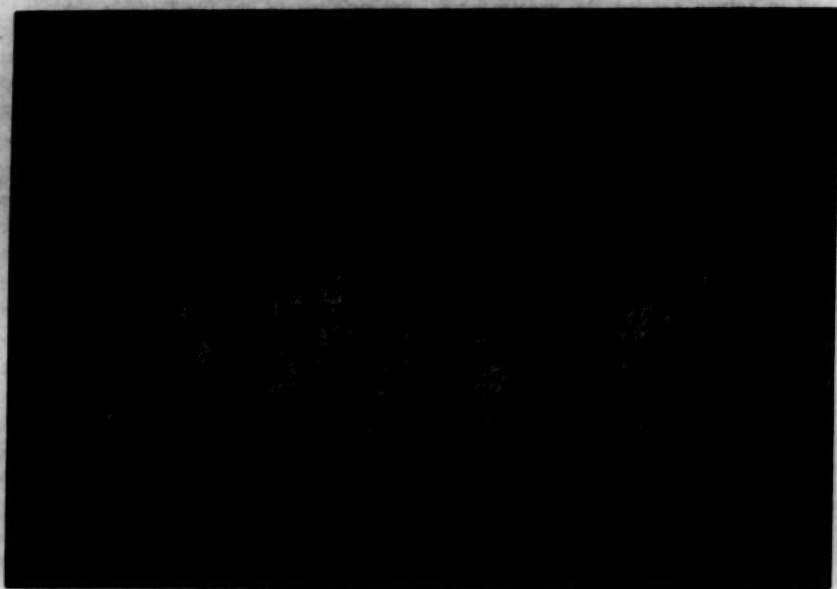
It was a great joy to me to meet Miss Simpson who is filled with interest in the work of her organization and enthusiasm for the educational work which is now in progress in China. She has a background of nineteen years in China and is one of the early directors of nursing schools, having established and developed the Florence Nightingale School of Nursing, Magaw Memorial Hospital, the first hospital for women in China, at Foochow. She left her school to which she was devoted to take up the arduous duties of Executive Secretary of the Nurses' Association of China. She has a tremendous task and feels that her work is but in its infancy. She travels vast distances into the interior by chair, boat, ox-cart, or any conveyance she can find to visit the

registered schools of which there are sixty-eight, besides conducting the general work of the association.

The training of nurses is closely linked with medical missionary work in China and commenced very soon after graduate nurses began to come to China as missionary nurses. Elizabeth McKechnie, a graduate of the Philadelphia Woman's Hospital, was the first missionary nurse and came to Shanghai in 1884 as assistant to Dr. Reisnyder. Missionary hospitals were then in process of building; more foreign doctors and nurses came and the training of Chinese doctors and nurses began. The foreign nurses brought with them methods used in their own schools and went back to their countries on furlough about every four years where they got in touch with advances in their work. I am sure we, in our comfortable schools, hospitals, and nurses' homes, cannot begin to realize what these pioneer nurses in China endured in working without equipment or adequate help, surrounded by ignorance, superstition, and the ancient traditions of the Chinese, learning a most difficult language and living in a climate either intensely hot or intensely cold and damp, with but few of the creature comforts to which they had been accustomed. The world has not yet paid its tribute to these large-souled and devoted women. In my all too brief and hurried visit I was profoundly impressed by the spirit back of the work at each school I visited; not once did I hear a word of regret for having come to China or a complaint for absence of personal comfort or even desire for home. The second impression I received was the kindly attitude toward the Chinese student;



MAGAW MEMORIAL HOSPITAL, FOOCHOW, CHINA



**FLORENCE NIGHTINGALE SCHOOL OF NURSING AND MIDWIFERY, MAGAW MEMORIAL HOSPITAL,
FOOCHOW, FUKIEN, CHINA. MISS SIMPSON IN THE CENTER**

every superintendent is enthusiastic over her students; there is no talk of the shortcomings or lack of interest or infringement of discipline,—because it does not exist. Each school is a united family, animated by strong spiritual leadership; everywhere the students are interested in themselves and their hospital work; everywhere they were proud to show me their patients, their charts, their operating rooms. I was much impressed with their businesslike manner, their neatly-made long white aprons coming up to the neck and fastened on one shoulder and side by cotton loops, with sleeves comfortably full and well above the wrist, but not the elbow; good shoes and adequate linen caps which were very much like our best types of caps. The students of the David Gregg Hospital, Canton, are wearing white trousers and white coats fastened on the shoulders in the same manner as the long coats. They looked very comfortable and I saw some playing volley ball and admired their freedom of action. The Chinese student is always very gracious, polite, and smiling. As a rule she does her work deftly and while no doubt she has her faults and gives her teachers anxiety at times she is certainly very sweet and lovable as you see her at work in the wards.

I was particularly impressed with the Chinese graduate nurses' uniforms which seem to be the same throughout China. Here again they have the short coat and white skirt which is sufficiently full for action and of medium length, the sleeves slightly below the elbow, the collars of the coat of medium height and fastened at the side, and a white starched linen cap. The Nurses' Association of China has adopted a standard

cap which is worn by their members, but the Chinese nurses who have been trained in the United States or England frequently wear the uniform and cap of their school.

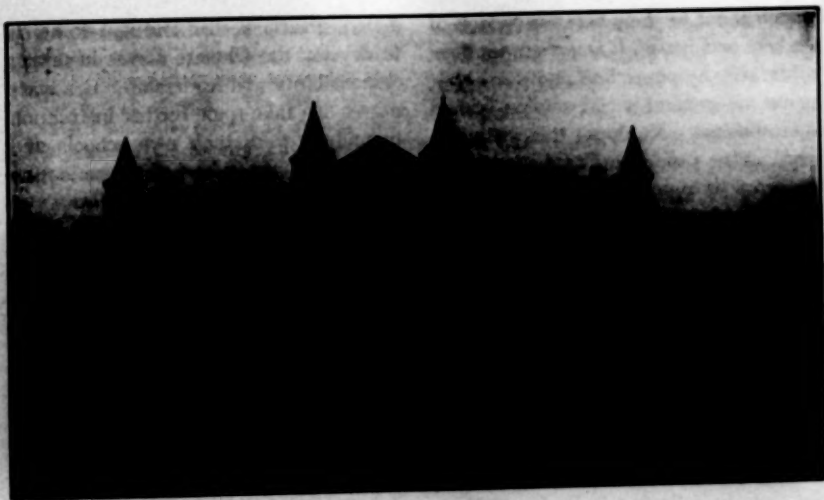
The course of instruction in the registered schools covers three and in many instances four years. There is no law in China governing the registration of nurses or inspection of schools of nursing. The Nurses' Association of China fulfills the functions of a law as we understand the term in the United States. The association sets the standards for an accredited school, inspects and registers the school if it meets the standard. The required course of instruction covers three years. When the four-year course is taken, the first year is given to preliminary work. Many applicants come to the schools without sufficient educational preparation and take this year in preparation and also study English. In some schools a tuition fee is required; in others, none. This does not exceed \$50. The majority provide full maintenance, some give a monthly allowance ranging from the equivalent in our money of fifty cents to one dollar a month. A deposit for breakage is usually required. At the Turner School in connection with the David Gregg Hospital, Canton, students who leave during training must pay back to the hospital the amount of their board and general expense from the time they entered, at the rate of \$3 a month, and this may be the case in other schools. In the thirteen schools I visited in China, I found the students well housed. They have as a rule their own building which is attractively furnished in Chinese style and scrupulously clean and orderly; they were not overcrowded and

had fairly good arrangements for bathing. The Chinese like hard beds and often use a board foundation with a straw mat, or a thin mattress or quilt; their cover is a thick quilt covered with either cotton or silk. During the day this cover is folded and put away in a drawer or closet, or it may be folded lengthwise on the side of the bed in very much the same way that we fold the upper bed clothing in preparing for an ether patient. I saw these beds in several schools although there were the ordinary western beds in some. Plumbing is often deficient and out of order or entirely absent. I saw the Chinese tub, known as the Sochow tub, which is round and high, made of wood or porcelain, which has to be filled by means of buckets and emptied accordingly. Occasionally water taps are supplied. The Chinese are personally very clean and want a hot bath every day. However, water is sometimes scarce especially before the rainy season.

I found with few exceptions good classrooms and equipment for teaching, such as charts, skeletons, a Chase or a homemade doll. Nowhere did I see a school without a classroom, and in some instances I was able to see the classes in session. The instruction is given slowly, with much emphasis and repetition, and in English, where nurses are teaching. Notes are taken and are gone over carefully by the teacher. It must be remembered that all foreign nurses and doctors go to language school before they begin their work while the Chinese student nurses and medical students learn English so that in their instruction and work in the hospitals they use a common language. There are no characters in Chinese to denote

medical terms and that is why English must be mastered by the students. The schools are following the curriculum of the National League of Nursing Education which is also a requirement of the Nurses' Association of China. The arrangement of their instruction is about like ours including the preliminary year. The students are never sent to the wards until they have had at least six months' study and English. The full schedule of hours of duty later does not exceed eight hours a day. The students all look very fit physically. I had the privilege of speaking to several groups by means of an interpreter and I was able to see them both on and off duty. They have a plentiful opportunity for experience in the mission hospitals in all services.

I found the wards and private rooms filled and the out-patient departments overflowing. True, the hospitals I saw were in the crowded cities where one would expect a large out-patient attendance, but I am told by Miss Simpson that this is the case even in the less populated cities. I confess I was unfavorably impressed at first by the general appearance of the wards,—the marked difference between first, second, and third class, and my democratic soul rebels when it is a question of the sick, against the straw mattress of the second class, the board and mat of the third class. But when I reasoned it out, I became more resigned and understood why this had to be. The straw mattress can be emptied and burned and fresh straw substituted often; the boards and mats can be scrubbed. At the Nethersole Hospital in Hong Kong I saw the boards as white as the deck of a steamer in the early morning. The



KUNG YEE HOSPITAL, CANTON

bedside table and utensils were not always such as we use, but they were clean and adequate. There were not always the beautiful medicine closets and treatment trays, but in many hospitals each patient has his own clinical thermometer kept in a separate glass and the charts were well done and the bedside records neatly kept. In some hospitals such as the Peking Union Medical College the equipment is Western and quite elaborate. On each bedside table a pot of hot tea and hot water was kept constantly replenished. There are usually ward assistants called "amahs" (women) or there are the Chinese "boys," usually men in years, who keep the ward clean, scrub utensils and look after the hot tea. The diet is, of course, Chinese. At the Peking Union Medical College I was told by the dietitian that it is well balanced and can be very easily adapted to special forms of diet. Chinese cooking requires a special kitchen as food is generally

steamed. I was much interested in the kitchens which were clean. The cooks and assistants were always spotlessly clad in spite of soft coal and clay stoves.

It must be remembered that the mission hospitals have a struggle to get funds to carry on their work, a large amount of which is free, but whatever they may lack in equipment or in scientific care is supplemented by the wonderful spirit of their work and their faculty of improvising. I was greatly impressed by the out-patient work and in some places, notably in Shanghai, there appears to be a great amount of pre-natal and children's work done. I saw at the Margaret Williamson Hospital a quantity of pre-natal and post-natal literature which is given out and I understand that here some follow-up work is done. I regretted that I was unable to meet Dr. Peter who is doing much in children's work and to see some of his interesting charts. As a rule, follow-up work from the dispensary to the

home cannot be done because of lack of workers and funds; it is sometimes done voluntarily by physicians and nurses but as yet no general social service system is established. No doubt this will come soon, as the time seems ready for it and the work is pointing in this direction. In maternity the Chinese woman has been slow to go to the hospital for confinement and has relied upon the midwife who is not trained and who often does a great deal of harm. I was told that the maternity work is increasing in the hospitals. However, nineteen babies were born at the Margaret Williamson Hospital in Shanghai between Saturday noon and Monday morning, which does not seem to indicate a lack of confidence on the part of the Chinese expectant mother in that particular community. Maternity is the same all the world over and the Chinese mother requires as skilled care as her Anglo-Saxon sister, even though she may give birth only to a daughter. I was told the midwife receives a few more coppers when a boy is born. Boys count in China.

The student nurse on the completion of her course is examined by the Examining Committee of the Nurses' Association of China and then receives her Nurses' Association of China diploma and the diploma of her school. She does not receive the latter until she has passed this examination. There is as yet no graduate study in China and graduates go to the United States or England for further work. It is contemplated that graduate work in public health nursing and in administration will be developed at the Peking Union Medical College, Peking, at the Margaret Williamson Hospital, Shanghai, and at the Hunan-Yale Hospital, Changsha. It

is very greatly needed and will do much to develop the Chinese nurses in taking responsibility and leadership. Graduate nurses can take some further instruction in midwifery in their own schools and qualify for the midwives' examination held by the Nurses' Association of China. Midwifery instruction is designated as non-operative and operative, and students are trained to deliver with forceps. There are no laws governing the practice of midwifery, no examination other than that given by the Nurses' Association of China, and no penalties for mal-practice other than those imposed by the same organization.

The training of male students parallels that of women students. They attend the same classes with the exception of obstetrics and have their practical work in the men's wards and the operating-room. Women students or graduates do not nurse male patients in China; there are a number of male students in each school and some schools train only male nurses. It has been a mooted question as to whether Chinese women students should not be taught to nurse men and this has brought forward considerable discussion in the Nurses' Association of China. Public opinion is very much against it. Gladys Stevenson, in a strong article published in the quarterly *Journal of the Nurses' Association of China* (April, 1922) presents the situation in this regard and I take the liberty of quoting from this article.

It seems to be beyond question that the whole fabric of Chinese society must be altered before these things can be. Chinese manhood must learn to have a purer, nobler idea of their womankind and accord to them a respect which is sadly lacking at the present time. In a society where Christian educated girls can still be bought and sold and resold

by their heathen relatives without a dissentient voice being raised, it is surely impracticable to think of replacing male nurses by girls for the nursing of men. The Emancipation of Women must first become an accomplished fact throughout the country. Even when at length it does become an accomplished fact and girl nurses may have replaced men, there will still be many positions open for male nurses in general hospital work, such as Dispenser, Anaesthetist, Masseur, Laboratory Assistant, etc., so that I fully agree with Miss Haward that it is well worth while giving our men nurses the very best training we can and do not hesitate to recommend nursing as a life work for educated young men. In Western countries even now, notably Scandinavia, a large number of male patients are nursed by men nurses.

In the matter of nursing textbooks, it may be interesting to know that a number have been translated into Chinese and two have been written in Chinese by a Chinese physician, namely, a quiz book on practical nursing and one on genito-urinary diseases. Those translated are: "Practical Nursing" by Pope and Maxwell, Bundy's "Anatomy," Stimson's "Drugs and Solutions," Reid's "Bacteriology," Hopkins' "Roller Bandage." As the translations are very expensive, the Rockefeller Foundation has given money for the translations which the Nurses' Association of China will print and publish.

The Chinese are eager for education and take it seriously. The students of nursing are serious in their work and have great reverence for their teachers, not only during their training but after they leave the hospital, they always wish them to share in their joys and sorrows, to know of their marriages and the birth of their children. Many of the Chinese women students marry after graduation. They are critical and have an appreciation of good teaching and the high

characteristics of their teachers. The schools are maintained on a strictly educational basis. Not once did I get the reaction that the object of the school was to carry on the work of the hospital and in almost every school I visited there was the full capacity of students which is surprising when the high educational requirements and the course of study are considered. Some Chinese nurses are being educated in American schools and are returning to take up leadership in the Chinese schools. Lillian Wu, a graduate of Johns Hopkins School of Nursing, is the superintendent of nurses at the Chinese Red Cross Hospital, Shanghai, and is doing splendid work in her hospital and school. Miss Sze, also a graduate of Johns Hopkins, is in charge of the outpatient department at the Peking Union Medical College. Other students are in training at the Peter Bent Brigham, Boston, the Presbyterian, New York, and in other schools. These graduates will be a force in leading the Chinese nurses and in time will be able to improve conditions in the hospitals controlled by Chinese.

The centers of nursing education in China will probably be Peking, Shanghai, Changsha and Canton as good institutions, not only for nurses' education but for education in general, are established in these cities. China needs many good nurses; the health problems in this country are serious and the Chinese nurses will be a telling factor in promoting better health and better health conditions in the country. At present foreign teachers are very much needed, nurses who will go to China with wide-open vision, a deep sense of the importance of their mission, and a sympathetic



IN THE DEMONSTRATION ROOM, PEKING UNION MEDICAL COLLEGE

understanding of the Chinese people. When all is said and done, the work is for the Chinese, and that is the spirit that I found in it from Peking to Canton.

I have in this brief sketch endeavored to picture nursing education in China as it was unfolded to me in my all too brief visit. I went to China with little special knowledge of what was being done there in nursing work and only a few facts in my mind. I came away deeply impressed with the work and the workers. I touched only at Peking, Tientsin, Shanghai, Hong Kong and Canton. I was unable to see the vast inner country. At each of these points I was delightfully entertained by the nurses, in fact quite taken in hand. My programme was made out with scarcely a margin of time to even peep into a shop. I was the guest of the hospitals and could come closely in touch with the

hospital life. It was interesting to meet nurses from many countries and many schools and I often felt the great fellowship we have in our profession. After all, China is not so far away when we can be together in sympathy of purpose, ideals and helpfulness.

The nurses of China are united in the support of good educational requirements and methods of instruction. As with us, their opponents are from the foreign medical body, and as I close my article, I am informed that at the Medical Conference in Shanghai, in February of this year, the topic of nursing standards has been discussed. It is good to know, however, that, like us, the nurses of China have their strong supporters in some members of the medical profession and they themselves can strongly defend their own professional standards which they have so well established.

INSTITUTE FOR PRINCIPALS AND INSTRUCTORS IN SCHOOLS OF NURSING
GIVEN UNDER THE AUSPICES OF THE OHIO STATE LEAGUE
OF NURSING EDUCATION

TUESDAY, JUNE 5—Chapel, College for Women, Western Reserve University, Grace E. Allison, Lakeside Hospital, Cleveland, presiding.

9 a. m.—Registration; Opening of the Institute, Blanche Pfefferkorn, President of the Ohio State League; The Benefits Which Schools of Nursing May Bring to a College for Women, Helen M. Smith, Dean of College for Women, Western Reserve University; Round Table, "University Affiliation," conducted by Laura R. Legani, Cincinnati.

AFTERNOON SESSION, 2 p. m.—The Standards Which the College Must Exact From Schools of Nursing Which Expect to Have Their Work Recognized in Terms of Academic Credit, Henry E. Bourne, Professor of History, College for Women, Western Reserve University; Teaching of Psychology, Grace Preyer Rush, Assistant Professor in Experimental Psychology, College for Women, Western Reserve University. 3:15 p. m.—Tea, Art Museum. Hostesses, Cleveland League of Nursing Education.

WEDNESDAY, JUNE 6—School of Education, Euclid Avenue and East 107th Street. Claribel A. Wheeler, Mount Sinai Hospital, Cleveland, presiding. 9 a. m.—Some Problems in Nursing Education, Ambrose L. Suhrie, Ph.D., L.L.D., Dean of School of Education, Cleveland; Importance of Teaching Elements of Pathology to Student Nurses, Jonathan Forman, M.D., Ohio State University, Columbus; Diabetes, Alfred S. Masachke, M.D., Director of Medicine, Mount Sinai Hospital, Cleveland, Inspection of Mount Sinai Hospital. 12:30, Lunch, Hostesses, Faculty of School of Nursing, Mount Sinai Hospital.

AFTERNOON SESSION—Ella Best, Instructor, Miami Valley Hospital, Dayton, presiding. 2 p. m.—Treatment of Diabetes with Clinical Demonstrations, Julius J. Schman, M.D., Mount Sinai Hospital Dispensary; Lesson in Nursing Diabetes, Evelyn Childs, Medical Supervisor, Lakeside Hospital, Cleveland; Demonstrations, Serving a tray to diabetic patient, Intravenous infusion. Giving of hypodermics, Taking of blood for blood chemistry; discussion, Mahel Wheeler, Bellaire City Hospital, Bellaire; Tea, Cleveland Nursing Center. Hostesses, District No. 4.

THURSDAY, JUNE 7—Lakeside Hospital, Katharine Buckley, Principal of School of Nursing, Jewish Hospital, Cincinnati, presiding. 9 a. m.—Bacteriology as a Preparation to Further Work in Preventive Medicine, Gaius E. Harmon, M.D., Western Reserve University; Lesson in Bacteriology, Lois Spraker, Instructor School of Nursing, Lakeside Hospital; The Head Nurse as a Correlating Factor in Teaching of Bacteriology, Carlotta Agertier, Supervisor in Pediatrics, Lakeside Hospital; Inspection of Lakeside Hospital. Lunch, Hostesses, Faculty of Lakeside Hospital.

AFTERNOON SESSION—Lakeside Hospital, Lucy Allen, Principal, School of Nursing, University Hospital, Columbus, presiding. 2 p. m.—Demonstrations,—Hot applications, Nose and throat cultures; Discussion, Cora Brown, Instructor, Lancaster Hospital, Lancaster; Teaching Essentials of Materia Medica, Neva Mote, Instructor, School of Nursing and Health, Cincinnati, Ohio. Tea.

FRIDAY, JUNE 8—City Hospital, Scranton Road, Cleveland. Margaret Napier, Instructor, School of Nursing, Mansillon Hospital, Mansillon, presiding. 9 a. m.—Why Mental Nursing Should be Included in a Curriculum of a School of Nursing; Lecture on Psychiatry, Dementia Precox, Charles W. Stone, M.D., Assistant Professor of Nervous Diseases, Western Reserve University; Inspection of City Hospital.

AFTERNOON SESSION—City Hospital, Sister Mary Esther, Instructor, School of Nursing, St. Elizabeth's Hospital, Youngstown, presiding. 2 p. m.—Hydrotherapy and Radiotherapy in Care of Mental Diseases, Helena Willis, Supervisor of Psychiatry, City Hospital, Cleveland; Demonstrations,—Hot pack, Continuous tub bath, Cold pack; Discussion; Lecture on Occupational Therapy, Dr. Carsoch; Visit to Occupational Therapy Department; Visit to St. John's Hospital.

SATURDAY, JUNE 9—City Hospital. 9 a. m.—Round Table, Instructors' Problems, conducted by Ethel Acherman, Instructor Mansfield General Hospital, Mansfield; Round Table, Head Nurses' Problems; Lunch, City Hospital. 2:30 p. m., Auto ride.

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR

Director, Nursing Service, American Red Cross

NOTES FROM AMERICAN RED CROSS SCHOOLS OF NURSING IN EUROPE

P*rague School.*—The School of Nursing at Prague, Czechoslovakia, the first to be organized, is also the first from which the American Red Cross nurses will be withdrawn. The assignment of our first nurse to this School dates back to December 3, 1919, when Marion G. Parsons, who is the Director of the School and Alotta May Lentell left Paris to lay the foundation for a modern system of nurse education in one of the oldest countries of Europe. Over three years have passed since that time, and two classes prepared by Miss Parsons have been graduated, in 1921 and 1922. Step by step the practical teaching field in the State Hospital, which is connected with the University of Prague, has been developed. The residence for the students and staff, with classrooms and recreation rooms, have been gradually put into order until at the present time the conditions under which the nurses live and the food they eat would compare favorably with the good schools of this country. An Advisory Council composed of representatives from the Municipal Bureau of Hygiene and Education, the Medical Department of the University, the Medical Director of the State Hospital, and Representatives from the Czechoslovakian Red Cross has guided the affairs of the School. Later a School Committee composed of leading women was organized. This Committee has concentrated on the social aspect, and has been

a great support to the Superintendent of the School in helping to gain important improvements. An Alumnae Association has also been organized, which has done much to promote not only the social life of the School, but the fraternal element between the graduates. It has pledged itself in its constitution not only to interest young women of higher education in nursing, but to elevate the standards of nursing throughout the country and to work for the social and economical interests of nurses, and for high ethical standards for the nursing profession.

[Three of the graduates have been brought to the United States by the American Red Cross for further preparation in nursing, to return to the School for executive work. One, Vilma Cerna, after over a year's work in this country, died immediately upon her return to Czechoslovakia. Another, Fanda Ruzickova, having been allowed a year's credit, graduated this spring from the Massachusetts General School of Nursing and has returned to serve as an assistant in the School. One became physically disqualified.

The School averages between fifty and sixty students. The time has arrived when the American Red Cross feels that it has completed its obligation for the School, and plans are under way for the withdrawal of the entire number of American nurses not later than July first. Miss Lentell has already left, while Miss Parsons and Blanche Kacena, the Instructor of

practical nursing, will probably have within the next few months.

One of the graduates from the School, Miss Tobolarova, is now in London taking postgraduate work. She will return within the next few months to take charge of the School. She will be assisted by Miss Ruzickova.

Poznan School.—The School at Poznan, Poland, was the second one to be organized. Ita R. McDonell is the Director of this School. Here, too, the period of responsibility for the American Red Cross is gradually drawing to a conclusion. The staff includes two Polish-American nurses, who speak the language. The number of students in the School approximates between twenty-five and thirty. Perhaps no demonstration made by the American Red Cross of this nature has encountered more difficulties than this School. The difficulty in finding suitable quarters for the students and developing a practical teaching field has been very great indeed. The School being connected with a Hospital used for the treatment of railroad employees, has limited the experience, and affiliations have been required. This has increased the problem, because of the lack of proper supervision. By autumn it is expected that the American nurses will be replaced by graduates from the School or by Polish nurses who are in this country preparing for administrative work in connection with this and other Schools in Poland.

Warsaw School.—The School at Warsaw was the third to be organized, and here with a generous appropriation which was given by a graduate of the Army School of Nursing, Dorothea M. Hughes, for a period of three years, it

has been possible to develop a School on a very sound educational basis. The problems, however, for the Director, Helen L. Bridge, assisted by several Polish-American nurses and an American dietitian, in developing the practical and theoretical field in unison, have been great.

The quarters for the nurses, with their class rooms and teaching equipment could not be surpassed by any School in the United States. It has been pioneer work, frequently discouraging, but oftentimes most dramatic. Less courageous women would have given up. Given a hospital as a teaching field, without any equipment worth speaking of, a laundry with one broken mangle, kitchen equipment of an obsolete and inadequate character, with a Committee interested and anxious, but to whom nursing of America's standard is totally unknown, one can perhaps visualize to a certain extent the obstacles which lie in the way of the development of a modern system of nurse education. These difficulties, together with the unstable and constantly changing and depreciated currency where one must think in millions instead of hundreds of kronas, have not yet succeeded in breaking down the enthusiasm and optimism of the Director and her assistants.

The number of students in this School is fifty-three. The type of women who have entered both the Polish Schools, are very superior and when one sees the name of Potocka in the list, our minds turn at once to the lovely picture of the Countess Potocka with which most of us are familiar. The first class from this School will graduate the coming autumn. It is expected, however, to continue for at least another year and

possibly longer, gradually reducing the number of American supervisors. For the first time in the history of operating-room procedure in Poland, a graduate woman nurse, assisted by student nurses, has been introduced, demoting the *felchers* and *sanitars* to their proper place. The latter, regardless of the character of the patient or the sex, have hitherto been the only assistants in the operating-rooms.

American Hospital.—The American Hospital School of Nursing at Constantinople, Turkey, attached to the American Hospital, was organized in 1920 by a group of American Red Cross nurses who had been assigned to the Near East Relief and was later taken over by a Local Committee which undertook this important project. The School, like the Hospital, was fast becoming an established factor in the life of the community when the fall of Smyrna occurred. Immediately the Greek and Armenian students in the School became frightened and withdrew, crippling the School very considerably. The Turkish women, as is but natural when you appreciate that for centuries they have lived in seclusion, have not yet reached the place when they are very much interested in affairs outside of their own home, and have not entered the School in any numbers. The life of the School, therefore, has been very uncertain, the staff not knowing from day to day what the results would be. The latest reports, however, indicate greater stability and a general settling down. (Some interest is being aroused among the Turkish people, themselves, as to the purpose of the School.)

Lyda Anderson is the Director of the School. Elizabeth Marshall, the Direc-

tor of the Public Health Nursing Courses, writes:

In our well-baby clinic we see some of the results of the pre-natal work done. For instance, one day there appeared with her very new baby a young woman we had known for several months. She was proud of her baby because she had learned how to make baby clothes *à la Américaine* and brought the product for our approval. The baby was wrapped up in a brilliant royal purple blanket lined with gold. Next came a red and yellow shawl, a bonnet trimmed with pink and blue ribbons protected the head. The dress and socks were of a deep rose color, and shirt and band of pink, the diaper of gray. The warmth, the cleanliness, the comfort were *à la Américaine*; the mother was proud and so were we.

This well illustrates the oriental love of color. As funds of this School and the Hospital are supplied through a Local Committee, assisted by the American Red Cross, the nursing staff will probably be continued indefinitely.

Bulgarian School.—At Sofia, Bulgaria, Rachel C. Torrance who is the Director, now assisted by Theodora C. Legros, is busily engaged in the development of a School of Nursing. Little by little the plans for this are being pieced together. The usual Committee made up of local groups has been organized and is helping Miss Torrance work out and develop the School. Upon this Committee the Ministry of Education is represented by one of the State Inspectors. Says Miss Torrance:

He, of course, is approaching the work with the thought of the School as an educational institution, from which we should turn out graduates prepared to be efficient workers in all lines of health activities, for which the School stands.

It was a long time before Miss Torrance could get the Committee to see that nurses were needed for anything

else but hospitals. As a matter of fact, they desired very much to control the actions of the graduates and have them sign a contract to serve the Bulgarian Red Cross for a definite period following graduation. This plan has been set aside, as they have gradually begun to believe, through the efforts of Miss Torrance, that the care of the sick in hospitals as well as other forms of nursing work might safely be left in the hands of the graduates, themselves, and if properly prepared they would not need the compulsion of a signed contract. Seven probationers have already entered the School.

In Miss Legros' first letter which has just been received, she states:

The nurses' residence is most comfortable, the food, too, is surprisingly good. I am brushing up my French as this is the language I shall use with the doctors. I am studying Bulgarian too, and hope some day to speak as fluently as does Miss Torrance. * * * She, Miss Torrance, has convinced not only the members of the Committee, but a few of the so-called people in Bulgaria, that our School of Nursing is of greater importance to Bulgaria than the selection of a new Prime Minister.

Perhaps no field offers greater possibilities for the development of nurse education than that of Bulgaria. The Bulgarians have had the advantage of proximity to Robert College and the American College for women at Constantinople, and many of them have acquired a fine English education. The missionaries, too, have developed good schools at Samakov and other places. English is spoken by a surprisingly large group of people, and their outlook upon life seems freer and more advanced than that which prevails in some of the other countries where the Red Cross has attempted the organization of Schools.

These Schools while varying in certain minor details of organization, have generally adhered to a two years' course, with three or four months' preliminary work. The entrance requirements, the curriculum, the hours of work, vacations, have conformed to American standards, while in each a two or three months' course in public health nursing has been developed. In certain particulars, especially those with University affiliations, a larger proportion of the theoretical instruction has been given by University professors and medical men than would prevail in this country. The American staff in each has averaged three or four nurses, never less than two, and sometimes as many as seven, while in Warsaw and at Constantinople, American Red Cross dietitians have been supplied to organize the Dietary Department and instruction. The diversity of languages, even in one School, makes the teaching most difficult, while the total absence of textbooks on nursing either in French, which is quite generally spoken, or in the language of the several countries, increases the problem.

To these groups of American Red Cross nurses scattered throughout the countries of middle and eastern Europe, working against traditions, sometimes prejudice, but so far sympathetically assisted by small groups who believe in them, and in what they are attempting, let us accord due credit and our grateful appreciation. "From acorns great oaks grow," and so from these early beginnings there is no reason why the movement should not spread. The graduates from these Schools will be pioneers in the field in their own countries and will probably do for them what the

early graduates from Bellevue did for this country.

School for Jewish Women, Warsaw, Poland.—A School for Jewish women is being developed under the auspices of the Jewish organizations in Warsaw, Poland. Miss Greenwald, an American Red Cross nurse, has been sent to Warsaw by the Jewish Committee to direct this School. Says Miss Bridge in her last letter:

We are very happy to see this third beginning being made in Poland. The local Jewish Committee has also stated that their School must attain the same standard as ours.

JOINT AGREEMENT BETWEEN THE AMERICAN RED CROSS AND THE NEW YORK TELEPHONE COMPANY

Recently there was signed an agreement between the American Red Cross and the New York Telephone Company concerning the conduct, supervision, and direction of the Red Cross course in Home Hygiene and Care of the Sick to be taught in the New York Exchanges of the company. Because of the national character of the Bell Telephone System, it has seemed advisable to develop this work directly with National Headquarters of the American Red Cross, operating through the Division Offices.

The course of instruction conforms at all points to the Red Cross standard, and a joint certificate bearing the emblem of both organizations will be issued. Catherine E. Burke, a Red Cross nurse, and a graduate of King's County Hospital has been appointed by

the Company as full-time instructor, and this appointment has been approved by the Red Cross Nursing Service.

The first classes to be organized are composed of Exchange Supervisors, but all young women in the New York Exchanges will be required to take this instruction which is being given on the Company's time. Also, all expenses, even to the cost of certificates, are being borne by the Telephone Company. It is probable that the course will be extended in the same way by the Company to the Exchanges of the System in other cities.

INFORMATION REGARDING U. S. EMPLOYEES' COMPENSATION ACT

Nurses employed in Government Service during the War were not eligible for compensation under the Veterans' Bureau unless they had been militarized, but were privileged to apply for compensation to the U. S. Employees' Compensation Commission. Under recent decisions of the Comptroller General of the United States, however, claims for disability resulting from disease cannot be considered as coming within the meaning of the Compensation law. Therefore, tuberculosis and other medical cases are no longer compensable.

In order to protect those receiving compensation, Congress, under date of March 4, 1923, passed a Bill that those cases, (including disabilities resulting from disease), which were at that time receiving compensation from the Commission, should continue to receive it until March 1, 1924.

DEPARTMENT OF PUBLIC HEALTH NURSING

A. M. CARR, R.N., DEPARTMENT EDITOR

National Organization for Public Health Nursing

PUBLIC HEALTH NURSING¹

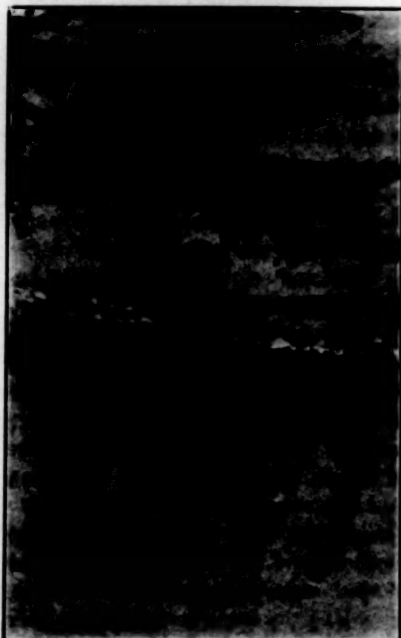
By JANET M. GEISTER, R.N.

THE pioneer work of the public health nursing movement was instituted almost exclusively in our big cities. Some of our older nursing organizations have been in existence from 25 to 35 years. These organizations have built the foundations on which public health nursing is established today. Out of their courageous and progressive work have been evolved the principles and standards that guide our present efforts.

As a countrywide movement extending from cities into villages and counties, public health nursing had its greatest development within the last ten years. In 1917, a group of government investigators made a series of studies in rural communities of conditions affecting maternal and child welfare. They found a great need for educational health work and a need for the care of the sick and for the correction of defects. They were often asked to make recommendations, and among other things their outstanding reply was, "Get a public health nurse."

Frequently came back the question, "But what is a public health nurse? What does she do? How can she help us?" Today we may travel into the most remote areas of the Kentucky

¹If you are interested, write to the National Organization for Public Health Nursing for free pamphlets,—"Public Health Nursing, Scope, Preparation and Opportunities."



Neither Snow Nor Distance Keeps Her From the Appointed Task

mountains; into the enormous counties of some of our sparsely settled western states; into the agricultural towns and counties of the middle west, into the mill villages of the Carolinas, into every state and type of community in these vast United States, and everywhere find that the public health nurse is not only known but that she is actively engaged in her line of work. We find her in

the humble one-room country school and also in the more pretentious city school; we find her in the homes of the citizens in better circumstances as well as in the homes of the poor. We find her at work in industries, in stores, in offices, in mining camps, on Indian reservations. We find her trudging faithfully through her city district or steering her Ford through the mud and snow of her county. We find her sometimes astride a mule toiling slowly up a dry creek bed to her Kentucky Mountain destination or traveling by dog-sled over the frozen areas of Alaska. So rapidly has the public health nurse found her way into all parts of the country and so thoroughly has she become identified with progressive health programmes, that in the ten years between 1912 and 1922 we find her number increasing from 3,000 to 12,000.

Public Health Nursing began in this country under the auspices of the church. Nurses were sent out as a humane service to give nursing care to the sick poor. Nothing was being done in those days to prevent illness, so these nurses' tasks were endless—no matter how long the hours and the days they devoted to their work, there was never an end to it. It was this group that demonstrated the *first principle* of public health nursing; namely, the care of the sick in their homes on an hourly basis. Medical science then pointed out that much illness could be prevented; that it was cheaper, wiser, more humane to prevent illness than to cure it. Nurses were quick to accept and put into practice these new teachings, and the *second principle* of public health nursing was evolved, the prevention of illness.

The *third principle* of public health nursing and the outstanding principle of all progressive health work, the promotion of health, is a development of recent years. It was realized that the individual was at the highest point of his effectiveness not alone when he was free from disease but when he was in good health, when he had life abundant.

Today we have as our guiding principles in public health nursing these three, the care of the sick, the prevention of illness and the promotion of health. While the second and third principles are receiving a great emphasis in our health work, our first principle is as inviolate today as it was in the days of our pioneers. A large number of our sick population must be taken care of in their homes, they are our concern. But our whole approach to the care of the sick has changed; instead of being a purely palliative measure we make it an educational process. As the nurse gives care, she teaches the family how it is done, thereby cutting down the need for her presence in the home. She turns: the presence of sickness within the family to invaluable account by teaching through her technic and through her health lessons the principles of asepsis, of personal and family hygiene, by developing health habits and by encouraging health promotion. In the early days the care of the sick was a limitless task; today it is a controlled service. Families are taught to share the responsibility, and the amount of illness is being reduced through educational processes.

One of the most significant developments in public health nursing is the public demand for the nurse; more and more is she recognized as an integral



On Hornsback in Tennessee

part of the community machinery, as is the health officer, and public school teacher, other public servants. A great wave of health hunger has swept over the country; our people demand to be healthy, they want to know how to keep well. Our book shelves are rapidly filling up with books on health subjects; our newspapers and magazines contain articles to meet the popular demand for health knowledge, but physicians, health officers, and the public itself, realize that health lessons in order to be effective must be put into practice within the home among the individuals who make up the community. And the public health nurse has been recognized as the most effective single agent for demonstrating and teaching health to individuals in their homes.

As one of the community's health representatives, the public health nurse occupies an exceedingly strategic position. She enters the homes, the schools,

and the workshops, and makes direct contact with individuals, with families, with school children and with workers. She gives nursing care to the sick member of the family and teaches the other members how to avoid becoming ill. She gives pre-natal and post-natal care to a maternity case and thereby not only serves a mother at a critical time in her life but also aids in laying a sound health foundation for the infant just starting out on his career. She places much emphasis on maternity, infant welfare, pre-school and school work, for she recognizes that herein lies the greatest opportunity for constructive work.

She follows up the discovered case of tuberculosis and is on the alert for the undiscovered case, not only in the patient's family but in the community as well. She follows up patients from the doctor's office, the dispensary, and the hospital, and teaches them how to carry out the orders that will restore them to health. In the industries and stores she gives first aid; she is on the alert for industrial hazards, she aids in increasing efficiency by her aid in diminishing physical handicaps.

"Public Health Nurse" is a term that applies to the nurse engaged in any branch of public health work. The "district," "visiting," "county," "tuberculosis," "social hygiene," "infant welfare," nurses are all public health nurses. The public health nurse may be engaged in any one of the special branches of the work such as infant welfare, tuberculosis, or school, or she may be doing generalized or family work that includes all branches of public health nursing affecting the family well-being. The nurses working in small towns and in counties usually do generalized work though

emphasizing, as a rule, some special phase, such as school nursing. In some of our big cities there is a marked trend toward the development of the public health nurse as a family health worker. On the other hand there are also in our cities strong organizations doing highly specialized work such as maternity, child welfare, etc. It is these organizations that do the pioneer work in their special branches, making demonstrations, developing new fields, and working out the most effective methods of procedure.

A striking evidence of the progress of the public health nurse is seen in the increasing tendency to pay her out of public funds. In the last decade great strides have been made in this direction. Villages, townships, counties, cities, states, the Federal Government, are all appropriating public funds for the support of the public health nurse. And parallel with this there has developed for the nurse a broader welcome in the community's homes. Formerly as "charity nurse" she entered only the homes of the sick poor; today she still enters them but she is also welcomed into the homes of all classes. The families in better circumstances are realizing that their need for constructive health work is as important as it is to those who are poor, and their doors are being thrown open in increasing numbers to the public health nurse. This is partly due to the fact that the nurse is more and more being supported by public funds and is therefore available for everyone, and partly due to the fee system instituted by our privately supported visiting nursing organizations. This system makes the use of the nursing service consistent with the maintenance of self respect by the charge

of a fee, and brings the nurse into many homes where otherwise she might not enter.

The development of rural public health nursing is a chapter of absorbing interest. Of comparatively slow progress until shortly before the war, it rapidly attained an impetus that carried the public health nurse into the most isolated regions of our country. Our rural people were slow in recognising their need for better health conditions. Lulled by a false sense of health security they permitted the cities to forge ahead of them in progressive health work. They were aroused to a realization that good health is more than freedom from disease; it is good individual and family hygiene and health habits, and these reinforced by fresh air, sunshine, lack of congestion, and fresh foods, give the rural citizen a decided advantage over his city brother,—otherwise the contrary is true.

As one of the first steps in the rural health programme they demanded the public health nurse and she responded in generous numbers. Her duties vary from helping deliver the mountaineer's baby, in the doctor's absence, to addressing the farmers at the county fair. She organizes health conferences, inspects the school house, and the school children, teaches home nursing and first aid, visits those who are ill and teaches some one in the family how to give care. In many places she is a part of a county health unit which is made up of a health officer, sanitary engineer, and public health nurses. She meets conditions at times that test character and courage as well as ingenuity.

The average public health nurse is a cheerful, happy individual. She gets

rained on and snowed on, she gets hot and dusty, and frozen and chilled, she gets footsore and weary, but there is a satisfaction in her work that compensates for all discomfort. She lives close to the great drama of life; daily she is in contact with some of its greatest problems and some of its greatest joys. She

realizes that her efforts, fruitless though they may appear at times, are all bent in the direction of the alleviation of human suffering, of the prevention of further suffering, and of the promotion of happiness and well being through the acquisition of good health, and herein she finds her greatest reward.

SUMMER SCHOOLS FOR PUBLIC HEALTH NURSES

In addition to the announcement in the last issue of the *Journal* of places where summer sessions for public health nurses will be held, we have received information as follows:

The University of California is offering a summer session at its southern branch in Los Angeles, from June 30 to August 11. General Public Health subjects. Director, Edith S. Bryan, University of California, Berkeley.

Other summer sessions or institutes not connected with University Departments offering the eight to nine months course in public health nursing will be held in the following parts of the country. Some special subjects will be emphasized in each of these places as follows:

Health Education—The State Normal and Training School, Oswego, N. Y. (See April *Journal*, page 575.)

School Nursing—The Pennsylvania State College, State College, Pa., June 25 to August 18. Address, Anna L. Stanley, Superintendent of Nurses, Department of Public Instruction, Harrisburg, Pa.

Institute of School of Hygiene, University of Omaha, Omaha, Nebraska. June 25 to July 7. Address, Director, Charlotte Townsend.

Maternal and Infant Hygiene—Under auspices of the Child Hygiene Division of the State Board of Health of Indiana. (See item under Indiana news.)

INDUSTRIAL NURSING SECTION, N.O.P.H.N.

Any individual nurse who is a member of the National Organization for Public Health Nursing is eligible to membership in this Section, by sending her name and address to the Secretary she may be enrolled as a member. The annual meeting of the Industrial Section will be held on Friday, May 18, at 2 p. m. As this meeting is to be held in conjunction with the National Organization of Social Workers, the place of meeting and programme will be announced daily during the session. The following programme is planned: Election of one nurse and one lay director to serve for one year. A paper will be read by Dr. Augusta Scott of the Metropolitan Life Insurance Company on Neuropsychiatric Work in Industry. This paper will be followed up by a round table discussion. The National Conference of Social Work will meet May 16 to 23 inclusive. The Sectional programmes are sure to be most interesting, and it is hoped that many industrial nurses may be able to take advantage of this opportunity. Mrs. F. J. Brockway, No. 1 Madison Avenue, New York City, Chairman of this Section, is eager to learn of all industrial nurses and Industrial Nursing clubs. If you are an Industrial Nurse won't you communicate with her and let her know of any Club of which you are a member?

MARY ELDERKIN, *Secretary*,

Union Carbide & Carbon Corp., 30 East Bond Street, New York.

HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

ALICE SHEPARD GILMAN, R.N., DEPARTMENT EDITOR

HOSPITAL STANDARDIZATION

By AMY M. HILLIARD R.N.

PURCHASING

THE superintendent is responsible to the governing board for economical expenditures of hospital money. Unless the hospital is large enough for the appointment of a steward, the superintendent will be the purchasing agent. Authority should not be given heads of departments to purchase supplies. The only exception to this rule might be in the dietary department and it is not safe to be too trusting even here. Here and there you will find representatives of firms who are unscrupulous enough to take advantage of the inexperience of heads of departments. If supplies are bought on a percentage basis and by heads of departments, the hospital bills may loom large. Very few representatives of business houses have the hardihood to offer percentages to the superintendent personally.

A convenient system for ordering is by the use of the triplicate order book. One copy of the order is detached and given to the dealer, one is detached and given to the book-keeper and the third is kept in the book by the superintendent for reference. This system prevents hasty purchases and if it is understood that no bills will be paid unless a duplicate order is attached, very little trouble will be experienced in checking initiative in unauthorized buying.

Coöperative Buying.—In New York City, there is an association of hospitals

organized for purchasing with a purchasing agent engaged to buy for all. When first organized, it was fortunate in having a very able purchasing agent. He made a business of analyzing all hospital equipment and supplies with a view to their standardization so that when buying sheets, blankets, foodstuffs, surgical supplies, etc., it was possible to be assured of the exact value of every article purchased and if any did not come up to specification, the goods could be returned at the seller's loss. Such a profit-sharing agreement between hospitals should be advantageous to all. The first duty of such a Bureau is to make the tests and comparisons necessary before adopting a standard. This requires time, patience and knowledge of values.

True economy in buying depends to a considerable extent upon the length of service the supply will give. Take the ward bed, for example. It should be of the simplest design possible, no shelves, trimmings, or unnecessary weight or size. It should go together easily, without the aid of a kit of tools, and should have large well tired wheels so that it may be rolled easily without danger to the floor and without unnecessary exertion on the part of the employees. Such a bed as this may be the most expensive, in initial cost, of any on the market, but it will prove cheapest in the end, as it will need practically no repair. It

will not overstrain nurses, nor tear up floors. If a Gatch spring can be added, it will save more than the additional cost by doing away with numerous pillows and back rests. It has one of the most comfortable back rests on the market, for the usual back rest is a misnomer and few patients can sit up in bed against one for any length of time.

A central bureau where every piece of equipment can be tested by experts and conclusions reached as to what articles and supplies are the best on the market (and where sound reasons can be given for arriving at such conclusions) will be very helpful to superintendents, particularly to those who lack judgment and experience in buying. Such a bureau should have the further advantage of getting lower prices by buying in large quantities. Almost all goods can be purchased more cheaply in quantity and directly from the mills. The profits of the middleman or jobber are thus dispensed with. This is particularly true in buying gauze, cotton, linen, etc. (The saving on a few items should pay dues to the bureau.) Unless such a bureau is under the direction of a purchasing agent of unquestioned ability, it may be the cause of irritating delays and stupid mistakes. As the appointment of its purchasing agent is in the hands of a committee from the hospitals represented, the hospitals have themselves to blame if they fail to receive intelligent service. Under a system of coöperative buying, it is necessary to draw up a rigid contract and to pay sufficiently heavy dues to support, not only a purchasing agent, but clerks, and to pay for the rental and furnishings of the bureau as well as for supplies

necessary for tests and for recording results.

Where hospitals are more or less isolated, the delays make such a plan impractical if not impossible. The nearest approach to it is buying by contract.

If you can establish cordial business relations with reputable business houses for the purchase of gauze, cotton, catgut, and rubber gloves, as well as for certain food stuffs, like flour, canned goods, etc., you will usually find that the representatives of such firms will take genuine interest in your affairs and will be of great service to you in advising you as to probable fluctuations in the market so that you can take advantage of such and thereby save many hundreds of dollars each year. Such contracts will guarantee you against declining prices. In other words, suppose you contract for gauze at 3 cents per yard to be delivered, 5000 yards every two months, or thereabouts. If the price of gauze advances, you are protected as you pay no more, but if it declines you are given the advantage of the decline in price. This plan saves time, as you will avoid repetition in ordering, and saves money as you will buy when the market is low and will have the advantage of a low price. Catgut, adhesive, rubber gloves, food stuffs, etc., can also be purchased on this basis. Such a plan makes it worth while for manufacturers to give you financial consideration, as they are assured of your business on a yearly basis and they in turn can purchase raw supplies on the same basis without the risk of loss through lack of sale.

I do not believe it is always economical to buy in large quantities except on the plan of monthly deliveries, as the

more supplies on hand, the more likely there is to be waste. In purchasing, the problem of deterioration must also be taken into consideration. Rubber gloves, or in fact any kind of rubber goods, should be purchased in the smallest quantities possible to meet needs. I might add also that it is economical to buy the very best rubber goods on the market. You can prove this point by dating with black paint all such supplies upon issuance and you will find that the best goods will not only outwear, but will be more dependable, (accidents to hot water bottles are not only disagreeable, but dangerous to patients) and require less repair.

One of the greatest mistakes in purchasing is to buy hit or miss from whoever presents the lowest price or the most plausible argument. It is usually more economical to buy by contract from the most reliable firm you can find. I do not mean that you put your trust wholly in any one firm without some system of checking up. You will never purchase economically without an adequate check up all along the line. No harm is done in pitting one good firm against another, but it is never wise to purchase cheap goods.

All good hospitals have deficits. In order to do scientific work, hospitals must either have very large endowments or corresponding deficits. They must often borrow money in order to pay their bills. It follows then that there are certain seasons when it is inadvisable to buy, as there will be no profit to the hospital in getting an additional 5 per cent discount if it has to pay 6 per cent interest on money borrowed to pay the bill. Ordinarily the summer months are lean months in the

hospital census and finances. It is, therefore, a bad time to buy heavily, unless goods can be billed later when funds are more abundant.

In order to buy advantageously, it is very necessary to know, not only when to buy, but in what quantity. A summary book of supplies used will show the quantities used quarterly or semi-annually. From this one can find the consumption of a certain supply during the preceding half year and arrange for the purchase of such supplies at definite intervals. The large items of expense in a hospital, outside salaries and wages, are for coal, food, cotton and gauze, surgical equipment, and supplies.

Coal.—For the purchase of coal, a superintendent is very dependent upon the advice of the chief engineer and I may say here that one who is well trained, experienced, and deeply concerned in the interest of the hospital is almost worth his weight in gold, for he can save more than the additional amount paid him in wages. Coal is a very expensive commodity and there is usually no economy in engaging a low salaried engineer or fireman. Except for the danger of freezing both patients and plumbing, I believe it might be a good idea to give a bonus to firemen for the saving of coal. Too few executives, except those with long and painful experience, have much knowledge of the amount of coal really needed to keep up a given steam pressure or to run economically, their heating, refrigeration, electrical, or other plants. It is not as expensive to get scientific advice on the subject as to pay coal bills. In connection with the engine room, it will be found not only economical, but

necessary, to have some one on duty who is able to make repairs to plumbing, steam fitting, electrical wiring, refrigeration pipes, etc.

Food Supplies.—The dietitian must of necessity do some of the ordering for her department. I regret to say there are too few dietitians who are competent to buy food supplies or to regulate their use. Most of the complaints about hospital food can be traced to their lack of imagination as to what to purchase, lack of experience as to what a good palatable menu should consist of, or how it may be varied to prevent repetition and consequent tiring from the monotony of certainty as to what food may be expected to appear on each given day. I believe that all hospitals buy good food and that all could serve attractive, if simple, menus for as low a cost as they usually serve uninteresting or tasteless ones. The great leaks in purchasing are in canned goods and meats. Very little can be done in cutting down the use of butter, eggs, cream and milk. The daily diet slips, signed by the supervising nurses and approved by the superintendent, will go far to prevent waste on wards and the judicious choice of desserts and the elimination of many more or less unpalatable so-called creamed dishes will be another check on the extravagant use of milk. A fair ward supply of milk is one pint for each patient on regular diet and one quart for each on special or fluid diet. This allowance assumes that there will be enough patients who prefer tea or coffee to allow extra milk for those who need it. The morning lunch, served daily to student nurses, takes a considerable quantity of milk, but it is a good investment. The largest

food bill is for meat. The dealers are canny and we find that they can offset a low quotation by sending cuts weighing many more pounds than were ordered. This makes the cost mount up without actually providing more meals. Any excess of meat generally finds its way to the employees' dining room, and unless a strict eye is kept in that direction, you will find that your food supplies for employees far outcost those for even the private patients, as the employees are much heavier eaters. If the hospital is fortunate in having a large cold storage department, meat and other perishable food supplies can be bought advantageously, weekly, in quantity, but if the refrigeration space be limited, it can be ordered weekly for daily delivery.

Electricity.—Electric light bulbs should be contracted for yearly. The best make is the cheapest, and about the only way to economize is to purchase the small watt lights for toilets, hoppers, or other small spaces where bright lights are not needed, but it is never safe to use any but strong bulbs in lighting stairways, operating rooms, or engine rooms. Drop lights are very destructive to bulbs. The motion of moving the light about, as well as jarring and dropping, necessitates frequent renewal.

Linen and Cotton.—In the purchase of linen and cotton goods, you will be particularly dependent upon the monthly inventory and the record of the amount of linen condemned and the amount issued. Linen is very expensive, but here as much as almost anywhere else, the better the quality purchased, the more economy will be effected. There are staple brands of muslin that

are household words. The Utica sheet and Lonsdale and Fruit of the Loom muslins have been standards for years. There are other grades as good; some, like the Pequot are heavier and better for sheets and pillow slips. The same thing is true of spreads. There are some that will wear well and mangle easily in the laundry. Others, just as expensive, will prove far less satisfactory. All materials like muslins, linens,

napkins, scrim for curtains, towelling, outing flannel, etc., that are to be made up by the Sewing Committee must be purchased well in advance of the time for the Committee to begin fall work so that it may have a very clear understanding of what work will be needed. To meet not only the regular needs of the hospital, but to anticipate emergencies, there should always be kept on hand a year's reserve supply.

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Lillian M. Thompson, R.N., is a graduate of the Hartford Hospital Training School, Hartford, Conn., class of 1921. She is Supervisor of the Sewing and Linen Department and is in charge of the Orthopedic Plaster and Appliance Rooms.

Susan V. Sheaffer, R.N., is a graduate of the Lankenau Hospital, Philadelphia, and is superintendent of the Easton Hospital, Easton, Pa.

Clara A. Griffin, M.A., R.N., was one of the editors of the college paper at Wellesley College, and later obtained an M.A. in Journalism at the University of Wisconsin. She entered the Massachusetts General Hospital during the war, graduating last year. She has since then been a supervisor at the Quincy City Hospital, Quincy, Mass.

Bertha M. Richards, R.N., graduated from the Hartford Hospital Training School, Hartford, Conn., in 1920, and took a postgraduate course at the Boston Floating Hospital. Since then she has been doing private duty nursing.

Sadie A. Watson, A.B., R.N., B.S., is a graduate of Mount Holyoke, of Newton Hospital, Newton Lower Falls, Mass., and of Teachers College. She has held a number of executive positions as assistant superintendent of training schools, but for the past eleven years she has been an instructor in schools for nurses in the east and middle west. At present she is Preliminary Instructor for the three largest hospitals in Rochester, N. Y.

Neillie I. Mather, R.N., is charge nurse in the Diabetic Department of Clifton Springs Sanitarium, Clifton Springs, N. Y.

Gene Harrison, A.B., R.N., graduated from Cornell College, Mount Vernon, Iowa, in 1915; and from the Washington University Training School, St. Louis. After a few months of rural Red Cross nursing, she was appointed to the position she now holds, Instructor of Nurses, Missouri Baptist Sanitarium, St. Louis.

Edith Hurley, M.A., R.N., is a graduate of the Army School of Nursing and of the University of Michigan. She has been an instructor at the Post Graduate Hospital, New York, and is now Field Secretary of the Eastern Council of Nursing Education.

Anna C. Jamme, R.N., is Director of the Bureau of Registration of Nurses in California. See *Who's Who*, September, 1921.

Janet M. Golder, R.N., graduated in 1910 from the Sherman Hospital, Elgin, Ill., and had also one year in the Chicago School of Civics and Philanthropy. Miss Golder has held many important positions in various branches of Public Health work,—Infant Welfare, Social Service, Day Nursery, Field Secretary and Organizer in various parts of the country, the last being Investigator Visiting Nurse Study for the National Organization for Public Health Nursing. She was for two years with the Federal Children's Bureau; she has spent two years at Headquarters, and did some special work for Miss Goldmark's Survey of Nursing.

STUDENT NURSES' PAGE

DESCRIPTION OF A CASE OF "YAWS"

BY RUTH GETZLOW

Washington University School of Nursing, St. Louis

CONSIDERABLE interest has been excited here, by a case diagnosed as "yaws" which came into the Skin Clinic for treatment. Yaws is a tropical disease similar to syphilis but differentiated from it by the lesions, which are less papillary and seem to have a more marked covering. They have a tendency to form in circles. Since this is supposed to be the only case in the United States, it caused quite a bit of excitement.

The patient was a colored man, 40 years old, born in Tennessee. During the war, he was encamped at Camp Meade, Maryland, coming to St. Louis two years ago. Since coming to St. Louis, he has worked in a packing house where he has come in close contact with cattle and hides. He has had the usual childhood diseases but denied syphilis or gonorrhea. Nevertheless he had a four plus Wasserman reaction.

The first thing noticed by the patient was a swelling in front of his left ear which increased in size, becoming hard.

He went to a physician who "put a plaster on which caused it to become raw." He then went to another who "gave him medicine for the blood." Soon numerous little pimples appeared on his body, gradually became larger, itched and scaled off. (A physical examination showed none of these.)

The lesion at the time of admission to the Dispensary was nodular, the nodules varying in size from $\frac{1}{4}$ to 2 c.m., occurring in groups in circular arrangement. It was the same color as the skin, covered with a greyish tenacious scale.

The patient was admitted to the hospital for observation, and was given two injections of neo-salvarsan at appropriate intervals. After the first injection the lesion began to flatten out. This was much more marked following the second treatment. Numerous experiments on rabbits were made from his blood but, like many another interesting case, he was anxious to go home, so he was allowed to go before the lesion entirely cleared up.

A STUDENT NURSE'S IMPRESSION OF A STATE ORGANIZATION

BY LAURA VAN GORDON

Connecticut Training School for Nurses, New Haven

AS a student nurse, it was my pleasure to attend the annual meeting of the Connecticut League of Nursing Education held at Waterbury, January 26. It is a wonderful opportunity for

a student to attend such meetings, since it both changes her attitude toward her daily work and gives her an insight into what is actually going on in the organizations of graduate nurses.

We consider our days of training as such full days, that we are too busy to show any interest or, perhaps, we do not even think of what the graduate nurses are doing or what the different organizations should mean to us. But should we come to the completion of our training without having an idea of what these mean to us, we should be very seriously handicapped. As a duty to one's self and to the profession, and in order to keep up with the times and raise the standards of the profession, each nurse upon graduating should join the alumnae association of her school and the state and national organizations.

We, as students, see only the one side of the nurse's problem. We see things only as we come in contact with the affairs of the hospital. We do not understand that beyond the petty affairs of our daily life there are more vital questions to be answered and problems

to be solved which can only be solved by women with an earnest desire to push nursing standards up to the highest possible place.

It is only by coöperation that such things can be accomplished, coöperation of nurses with firm purpose and high ideals who are eager to solve these problems.

Are we, as we step from the door of our school, going to stand by and look on? No! We cannot disappoint those who have already worked so hard. Many of those faithful workers are already weary and are looking eagerly to us to go on with the work. Shall we disappoint them or will they feel that they have left the task in willing hands?

It is for this work that graduate nurses have organized, and it is up to us who are about to graduate to acquaint ourselves with their purposes, and to assume an active part in this work.

LAST IMPORTANT NOTICES

Michigan: THE STATE LEAGUE OF NURSING EDUCATION will hold an institute in Detroit, June 11-16, for teachers, training school executives, and all engaged in educational work. Harper Hospital will be headquarters.

Missouri: Kansas City.—The local League of Nursing Education will hold an institute for instructors and others connected with schools of nursing. The dates will probably be May 12 and 13. For information, address Anna May White, Research Hospital.

Washington: The annual meeting of the WASHINGTON STATE GRADUATE NURSES' ASSOCIATION will be held in Tacoma, June 5; the State Public Health meeting on June 6; and the meetings of the Northwest Sectional Conference, June 7-9.

Wyoming: THE WYOMING STATE BOARD OF NURSE EXAMINERS will hold an examination at Cheyenne, June 18, 19, 20. Applications should be filed with the secretary before June 1. Mrs. H. C. Olsen, 3122 Warren Avenue, Cheyenne.

Please give or lend this JOURNAL to a high school or college girl who would be interested in Nursing as a profession.

LETTERS TO THE EDITOR

The editors are not responsible for opinions expressed in this department. Letters should not exceed 250 words and should be accompanied by the name and address of the writer.

A SHARING OF HONORS

DEAR EDITOR: I have often wished for an opportunity to show my appreciation of the nurses who served with me during the World War; believing that most of them may be reached through the *American Journal of Nursing*, I am asking you to please find space in the April edition, for a few words over my signature. My being chief nurse at the Base Hospital, Camp Devens, Mass., was due, simply, to my previous service as chief nurse in the Army Nurse Corps. Realizing that the Distinguished Service Medal was awarded to those who served with me quite as much as to myself, I take this opportunity to thank them for their generous, loyal support, without which my service could have been neither meritorious nor distinguished.

JANE G. MOLLOY.

Fort Benjamin Harrison, Indiana.

(We regret that Miss Molloy's letter reached us too late for publication in the April *Journal*.—Ed.)

THE McISAAC LOAN FUND

DEAR EDITOR: Many nurses who knew and loved Miss McIsaac are interested in the fund which was established in her memory and may be glad to see a report of it occasionally. Loans are made from this Fund for a five-year period at 2 per cent interest; they are entirely for educational purposes. At first the amount loaned was \$100, but that proved to be of so little help that it has been increased to \$300. Eight nurses, altogether, have availed themselves of this aid. Two of these loans have been repaid, but \$1000 is now outstanding. The report of the Fund for 1922, shows that the year began with a balance of \$812.31. A contribution of \$25 was received from the Third District of Wisconsin. Interest amounted to \$1.21. Loans were made, amounting to \$800. The balance at the end of the year was \$48.52. Appeals for loans from this fund are now being received which cannot be met until some of the loans are repaid or until further contributions are received. Some of the appeals are from nurses who are ready to enter Teachers Col-

lege, but who cannot possibly get through the year without such help as this. If those who feel indebted to Miss McIsaac could contribute further to this Fund, even in small sums, it might make one or two loans possible for the coming school year. Such contributions should be sent to the treasurer of the Fund, Mary M. Riddle, 223 Newbury Street, Boston.

SECRETARY, McISAAC LOAN FUND.
New York.

A NURSES' HOME IN A SMALL CITY

DEAR EDITOR: The letter of L. V. N., New York, "A Plea for More Nurses' Homes," in the February *Journal*, has attracted my attention. I have lived in a nurses' home connected with a central registry in a small city of 50,000 inhabitants for several years, and I have wondered, since reading the letter, just what is provided in the "homes" of which she writes, over there in "little old New York." In the nurses' home where I live, we pay \$12 each, per month, two nurses in a room. Most of the rooms are large, and each nurse has her own comfortable single bed, her own bureau and half of a large square closet. Plenty of light and air is enjoyed, as each room has two windows, and all of the rooms are sunny. We live on the corner of two wide streets, and there is only one room in the house that has not an outlook on one or other of these streets. A large yard at the back prevents the cutting off of air and light by other dwellings. A wide veranda occupies one side and the front of the home, where we have swings, a hammock-couch, and porch chairs "in the good old summer time." We have a bath room on each floor and an instantaneous heater provides plenty of hot water all the time. Each room in the house has an open gas grate fire-place. A library and reception room is provided on the first floor where the nurses receive their guests ("male and female") every afternoon and evening up to 11:30. The home closes at this hour—unless we are out late at some place of entertainment. This is the only rule, that we are expected to be ladies at all times, and to conduct ourselves as we would under

our own mother's care. The library and reception rooms are coaly furnished. There is a large Aeolian vocalion and a good selection of records. In the basement we have a kitchen, where we may cook anything we wish at any time during the day. There are also laundry tubs with hot and cold water, ironing-boards, irons, clothes linen, and a large range. On the first floor there is a kitchenette, with a hot plate, where we make tea, coffee or cocoa for light lunches. This kitchenette contains two refrigerators, and ice is furnished for us in hot weather. There is no extra charge for either water or gas to do any cooking or laundry work we may desire. Food is not provided, of course; but there is a cafe on either side of the house, and within "a stone's throw," where meals and lunches are served at reasonable rates. But if we wish to purchase and cook food for ourselves, we have that privilege. We are expected to keep our own rooms neat and in order. A maid gives them a good cleaning weekly. We pay the registry \$10 a year for our calls; this fee includes telephone service and the use of the library telephone. While we are free from the noise of street cars on either street, we are just one square from two lines of street cars. Would you call this "comfort for nurses" at a reasonable price?

West Virginia.

G. M. M.

"LOOK BEFORE YOU LEAP"

I.

DEAR EDITOR: On page 505 of the March issue of the *American Journal of Nursing*, there appeared an open letter entitled "Look Before You Leap" and signed by the initials "L. R. O." While rather rambling in nature, the outstanding idea that this letter attempted to convey to the readers of your *Journal* was the great desirability of nurses refusing to accept positions in foreign countries without a satisfactory contract covering their terms of employment and return from such location, and an insinuation that the writer of this letter had recently been very unjustly treated by the Superintendent of a hospital in Panama City, who is an American officer detailed for duty there by the United States Government. Since I am the only American officer detailed to duty as Superintendent of

a hospital in Panama City, it is felt that in fairness and justice to the other hospitals located here, an explanation should be made thereby relieving them from such disgraceful charges as the writer of said letter makes by implication and actual statement. I have no desire to make any comments on the contents of her letter other than to state that it is not customary for American nurses employed in this institution to be summarily dismissed without having given due cause for same or upon grounds that would warrant their discharge in any institution of similar nature in the United States. It might be interesting to your readers to learn that a nurse whose initials are "L. R. O." and who is presumably the writer of the letter under discussion, was discharged from this hospital several weeks ago for repeated and constant insubordination in the form of direct disobedience and violation of the standing regulations of the institution. Her attention was called on several occasions, both verbally and in writing, to her utter disregard of the hospital rules, but in spite of this action, she continued to carry on her customary conduct without change or lessening. In view of this fact, she was given the customary notice of two weeks' time and was advised that since she was unable to conform to the hospital regulations, it would be impossible to continue to utilize her services further. This action was undoubtedly the underlying cause of the letter that was published in your recent *Journal* and which actually portrays a state of conditions in an institution of good repute that would not tolerate an actual injustice of any sort to be imposed upon its American graduate nurses. I might further add that Miss "L. R. O." presented her complaint to a local Post of the American Legion and to local officials of a labor organization with the request that they investigate the alleged injustice and assist her by at least preventing a repetition of her treatment to other nurses employed in this hospital. Both of the organizations mentioned investigated the complaint of this nurse and after having done so, were so thoroughly convinced that her charges were entirely unfounded that they did not see fit to take further action and I am of the opinion that they did not even answer her letter transmitting her complaint to their organization.

This lack of consideration in itself would appear to prove that her charges were not considered justified and based on sound foundations by two active organizations who are constantly on the alert to right any wrongs that may be done to American citizens in this foreign country. It may further be said that Miss "L. R. O." proceeded to Panama and accepted a position in this institution solely upon her own application and through no invitation or insistence of anyone connected with the hospital. It is true she did not sign a contract to remain in our employ or any other document setting forth her terms and conditions of employment while here, since we do not make a practice of having agreements of that type with our employees, but had she observed the rules of the institution in a manner that could have been tolerated, there is no doubt that she would have been retained through the year that it is customary for American nurses to remain here and that she would have received all of the consideration that is invariably granted to our nurses who prove themselves amenable to the ordinary discipline required in a hospital of this type.

EDGAR A. BOCK, Major,
Panama. Medical Corps, U. S. A.

II.

DEAR EDITOR: In the March number of the *American Journal of Nursing*, there was an article written by someone with malicious comment on a hospital of very good standing in Panama City. The article appeared in the correspondence column, so of course it does not reflect on your *Journal*, but it does reflect on the Superintendent and the American nursing staff who are trying to keep the standard of the hospital up to a high mark. It speaks of the protection of Americans in a foreign country. Any nurse who conducts herself in a manner befitting her profession will not be in need of outside protection in Panama, at least many of us who have been employed at this hospital have so found. If the readers of this *Journal* knew that the life in Panama differs greatly from the life in the United States and that nurses are always criticized greatly without judgment or reason, then they would realize why the conduct of an American nurse in Panama

must be of a very strict nature. In regard to hiring and discharging the nurses, who has a better right and better judgment than the Superintendent? This feature of the administration is no different in this hospital than in any other institution. Then as to costs and means of transportation, where is there a position in the Tropics that pays your fare both coming and going when you are employed six months or even a year and are then discharged for gross misconduct? Anyone going any distance from home and seeking a position should always investigate the terms of the hospital in the same manner as the employer does his employees. Trusting that the letter mentioned will not prejudice other nurses against coming to Panama, as there are many of us who are thoroughly satisfied and happy in this hospital.

Santo Tomas, Ancon, C. Z. X. Y. Z.

JOURNALS ON HAND

Mary L. Crosby, Cynthiana, Ky., has nine copies of the *Journal* for 1913; July and August of 1914. She will be glad to send them to anyone who will pay mailing charges.

Helen B. Judge, 2623 Ellis Avenue, N. S. Pittsburgh, Pa., has *Journals* for 1921, April through December; the complete year for 1922. She will sell these for 15 cents a copy and postage.

Ethel Kehoe, Box 502, Myrtle Point, Ore., has *Journals* for 1919, April through December; all of 1920; all of 1921, except May; all of 1922 except June and August. She will sell these for 20 cents a copy and postage.

JOURNALS WANTED

DEAR EDITOR: Copies of the *American Journal of Nursing* will be welcomed at this office and turned to account for our profession. We would like to put them in the vocational files of high schools where such material will be sought and will afford opportunity for students to saturate themselves in the nursing atmosphere. Copies of this issue are especially desired. Your cooperation will be heartily appreciated.

FRANCES MALTY, Exec. Secy.
The Council for Nursing Education
of S. E., Pa.

221 S. 18th Street, Philadelphia, Pa.

NURSING NEWS AND ANNOUNCEMENTS

NATIONAL LEAGUE OF NURSING EDUCATION

The National League of Nursing Education will hold its annual meeting at the New Ocean House, Swampscott, Mass., June 18-22, inclusive. Swampscott is only a few miles out of Boston and the New Ocean House is one of the finest summer hotels on Boston's North Shore. Room reservations may be made by direct application to the hotel. Rates will be from \$7 to \$10 per day, American Plan.

NURSES' RELIEF FUND REPORT FOR MARCH, 1923

Receipts

Balance on hand.....	\$12,991.43
Interest on bonds.....	339.62
California: District No. 1, \$2; Dist. No. 5, \$50; Dist. No. 9, \$25; Dist. No. 10, \$6; Dist. No. 11, \$3; Dist. No. 17, \$7.....	93.00
Connecticut: Greenwich Hospital Alumnae.....	22.00
Illinois: Dist. No. 1, St. Luke's Hospital Alumnae, \$100; Presbyterian Hospital Alum., \$75; Individuals, \$34.....	209.00
Kentucky: Louisville and City Hospital Alumnae, \$25; Jefferson Co. Nurses' Club, \$10.....	35.00
Louisiana: Charity Hospital Alum., New Orleans.....	75.00
Maine: One individual, Oakland.....	1.00
Massachusetts: State Nurses' Association, \$10; one individual, Williamstown, \$1.....	11.00
Michigan: Dist. No. 2, \$25; Dist. No. 3, Battle Creek Sanitarium Alum., \$78; Nichols Hospital Alum., \$20; Individuals, \$8; Dist. No. 11, \$73; Dist. No. 14, \$153.....	357.00
Missouri: Ensworth Hospital, St. Joseph, \$5; Individuals, St. Joseph, \$5; Individual, Kansas City, \$1; Dist. No. 7, \$23.75.....	34.75
Minnesota: Dist. No. 3, Asbury Hosp. Alum. members, \$14; St. Barnabas Hospital Alum., \$50; Individuals, \$25.....	80.00

Montana: Ida R. Palmer—in memory of her sister, Sophia F. Palmer, \$100; State Nurses' Association, Dist. No. 12, \$30.....	120.00
New Hampshire: Nashua Memorial Hospital Alumnae.....	30.00
New Jersey: Dist. No. 2.....	98.00
New York: Dist. No. 7, \$30.50; Dist. No. 9, Albany Hospital Alum., \$50; Dist. No. 13, Sale of souvenir programmes, \$906.30; Park Hospital Alum., \$30; Sydenham Hosp. Alum., \$11; Individuals, \$27; Cochran Training School Alum., \$66; Dist. No. 14, \$1.....	1,121.80
Ohio: Dist. No. 4, Individual, \$1; Dist. No. 8, Christ Hosp. Alum., \$25; Deaconess Hosp. Alum., \$10.....	36.00
Oklahoma: State Nurses' Assn.....	19.00
Texas: District No. 2.....	5.00
Washington: District No. 2.....	16.00
Wisconsin: Dist. No. 8, \$25; Dist. No. 10, in memory of Dr. John Mathieson, Eau Claire, \$40; individual, Milwaukee, \$2.....	67.00
Total receipts.....	\$15,770.60

Disbursements

Paid to 33 applicants for March.....	\$510.00
Exchange on checks.....	1.60
Postage.....	2.56
Balance, March 31, 1923.....	\$15,256.44
Invested funds.....	\$9,250.00
	\$74,560.44

V. LOTA LORIMER, *Treasurer.*

All contributions for the Relief Fund should be made payable to the Nurses' Relief Fund and sent to the American Nurses' Association, 370 Seventh Avenue, New York. Requests for leaflets should be sent to the Secretary of the Association at the same address. For further information address Elizabeth E. Golding, chairman, 317 West 45th Street, New York.

PROGRAMME FOR CONVENTION, NEW ENGLAND DIVISION AMERICAN NURSES' ASSOCIATION, to be held May 22-24, New Sherwood Hotel, Burlington, Vt.

Tuesday, May 22, Morning Session.—Executive Meeting, 9 a. m.; Private Duty Nursing Section, Edna A. Cameron, Director. 1. The Private Duty Nurse a Pioneer Health Worker, Marion A. Gibson. 2. Private Duty Nursing, Viewpoint of a Young Graduate, Anne Shepard. Discussion. *Afternoon Session:* Reports from State Associations: Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut. Report of Activities, New England Division, Red Cross Nursing Service, Mary Nelson, Division Director. *Evening Session:* Prayer, Rev. Edwin Barre, Rector St. Mary's Cathedral, Burlington. Address of Welcome, Dr. Holmes Jackson, Mayor of Burlington. Response, Edith L. Soule, Maine. Address of President, Mary M. Riddle. The Bordeaux School of Nursing, Mary Beard. Address: What the Community Is Demanding of the Trained Nurse, Dr. H. C. Tinkham.

Wednesday, May 23, Morning Session.—State League of Nursing Education, Edith H. L. Clapp, Director. 1. The Place Mental Nursing Should Occupy in the Training School Curriculum, Anna K. MacGibbon, Rhode Island. Discussion, What a State Hospital Can Offer to Student Nurses, Mary H. Patterson, New Hampshire. What Mental Training Means to the Students of a General Hospital, Ellen M. Selby, Rhode Island. 2. Interpretation of the Equivalent, Josephine E. Thurlow, Massachusetts. Discussion. 3. Short Survey of the Rockefeller Report as it Pertains to Schools of Nursing, Carrie M. Hall, Massachusetts. Short Survey of the Rockefeller Report as it Pertains to Public Health Nursing, Harriet Leck, Connecticut. *Afternoon Session:* Address: "Nursing—A Profession?" Mary M. Roberts, Editor *American Journal of Nursing*. 1. State Legislation, Miss Sally Johnson. 2. Reports from Representatives of Committees on Legislation from the several New England States.

Thursday, May 24, Morning Session.—Public Health Section, Mary Beard, presiding. National Organization for Public Health Nursing, Anne A. Stevens, Director N.O.P.H.N. Discussions: State Public Health Nursing,

Maine; Red Cross, New Hampshire; Brattleboro School for Attendants, Vermont. American Child Health Association, Marie Rose, Associate Director. Discussions: Child Hygiene Developments, Connecticut; School Nutrition, Massachusetts; Mental Hygiene, Plan for Providence, Rhode Island. *Afternoon Session:* Question Box, conducted by Mary Grace Hills, Superintendent Visiting Nurse Association, New Haven. (Miss Hills will be glad to receive questions on topics previously announced or on any nursing subject.) Report of Tellers. Installation of New Officers. Announcements for Meeting in 1925. Round Tables will be arranged throughout the Sessions by Emma M. Nichols. Suggested topics are: Obligations of Affiliations, Student Government. Possibilities of a Central School for Small Hospitals. Statistics and Records for Public Health Nurses. The Public Health Nurses' Bag.—What Shall it Contain? Work of Public Health Nurses in care of Venereal Disease. Exhibition of Historic Slides.

ESTHER DART

MARY L. WAKEFIELD

BERTHA W. ALLIN

JESSIE E. CATTON, *Chairman.*

Programme Committee.

THE NORTHWEST SECTIONAL MEETING OF GRADUATE NURSES, for the States of Idaho, Montana, Oregon and Washington, will be held in Tacoma, Washington, on June 7, 8, and 9, when it is hoped all graduate nurses of the Northwest will come and take a personal interest in these meetings. Tacoma, "The City of Destiny," will endeavor to keep up her reputation of hospitality to all her guests.

ARMY NURSE CORPS

In March, 1923, the following named members of the Army Nurse Corps were ordered transferred to the stations indicated:—To Army and Navy General Hospital, Hot Springs, Arkansas, 2nd Lieutenants Louise Fennelle, Winifred I. Langan, Mabel E. Mariette; to Letterman General Hospital, Presidio of San Francisco, California, 2nd Lieutenants Mary A. Herbert, Ida L. Langenheder, Hannah A. Kallem, Mae R. MacDonald, Katherine A. Harks, Alma C. Hanson, Margaret C. Wang, Betty L. Stevenson, Sara I. Stevenson, Mary

L. Carney, Dorothy Froese; to Station Hospital, Ft. Sam Houston, Texas, 2nd Lieutenants Florence C. Daley, Violet M. Headland, Maude M. McKinney, Mary Merrick, Mary K. Sackville; to Station Hospital, Fort Sheridan, Illinois, 2nd Lieut. Isabel H. Armstrong; to Station Hospital, Fort Totten, New York, 2nd Lieutenants Blanche Chance, Ella J. Brown, Alice McCauley; to Walter Reed General Hospital, Washington, D. C., 1st Lieut. Mary C. Beecroft, Chief Nurse, 2nd Lieutenants Annie M. Shea, Emily H. Weder, Agnes Greenhilda, Bridget A. Mullaney, Ada M. Olson, M. Eliza Wenverling, Ebba C. A. Rorby; to the Hawaiian Dept., 2nd Lieut. Laura C. Hoston; to the Philippine Department, 2nd Lieutenants Alice I. Akelsy, Maude H. Hager, Marie L. Pace, Harriet L. Whitney.

Orders have been issued for the separation from the service of the following, named 2nd Lieutenants:—Agnes G. Blatny, Louise Boehme, Margaret Boyce, Martha F. Buchanan, Harriet H. Clogston, Alma E. Cron, Mary Elizabeth Edwards, Gertrude Hard, Rose A. Hartrick, Rebecca Hogan, Katherine E. Kelly, Isadore Klaus, Margarette J. Kriz, Gertrude Mangan, Nell Marley, Mary R. Moran, Olive M. Reid, Mae E. Shepard, Leah O. Sheppard, Annie L. Stapp, Louise M. Valle, Emma T. Waldron.

SAYRES L. MILLIKEN,
*Captain, Acting Superintendent,
Army Nurse Corps.*

NAVY NURSE CORPS

Transfers: To Annapolis, Md., Miriam F. Ballard, Chief Nurse; Lula Lloyd; to Boston, Mass., Miss Farmer's School of Cookery Course in Dietetics, Kathryn M. Bonner, Anna V. Broderick, Addie B. Cummings, Mary A. Hassler, Loretta Lambert, Marion F. O'Connor, Martha Schmidt, Marie Sennett; to Canacao, P. I., Rose L. Lane, Ada E. Welty; to Charleston, S. C., Mabel T. Cooper, Chief Nurse; to Chelsea, Mass., Myn M. Hoffman, Chief Nurse, L. Ethel Shanabarger; to Great Lakes, Ill., Kathryn V. Sheehan, Helen M. Wamsley; to Guam, Edith M. Ahlstrom, Elsie Brooke, Chief Nurse, Jane E. Hamilton; to League Island, Pa., Ida E. Brooks, Hilda Freding, Eva B. Moss, Chief Nurse, Kathleen O'Brien, Vivant M. Stewart, Teresa E. Wil-

kins; to Mare Island, Calif., Louise Cooke, Frances S. Dunk, Lillian Hankey, Chief Nurse, Mina A. King, Chief Nurse, Viola M. Vase, Margaret M. Webb; to New York, N. Y., Laura Hartwell, Emily M. Smelling, Chief Nurse; to Norfolk, Va., Nelle M. Alexander, Ruth M. Anderson, Chief Nurse, Genevieve C. Brown, Addie B. Cummings, Adah L. Farnsworth; to Norfolk, Va., Pharmacist's Mater' School, Mary E. Hand, Chief Nurse; to Pensacola, Fla., Anna G. Mays; to Pearl Harbor, T. H. Katherine M. Dalton; to Philadelphia, Pa., Navy Yard Dispensary, Elizabeth M. Hewitt, Chief Nurse; to Quantico, Va., Anne K. Harkins, Chief Nurse, Alice B. Newcomb; to San Diego, Calif., Ada L. Wood; to San Francisco, Calif., Hospital Corps Training School, Elizabeth M. O'Brien; to Tutuila, Samoa, Elizabeth L. Tope, Helen A. Russell; to U. S. S. *Henderson*, Temporary Duty, Ida L. Hodge, Irene Robertson; to Washington, D. C., Lydia J. Homans, Esther Le C. James, Chief Nurse; Betty W. Mayer, Chief Nurse; Nelle S. Snow; to Washington, D. C., Dispensary, Navy Department, Bernice D. Mansfield, Chief Nurse, Edith M. Conry, Temporary Duty; to Washington, D. C., Navy Yard Dispensary, Adah M. Fendleton, Chief Nurse; to Washington, D. C., Laboratory Course, Frances C. Bonner, Ruth B. Mentzer, Bertha I. Myers, Chief Nurse; to Washington, D. C., Physiotherapy Course, Frida Krook, Chief Nurse, Louise E. Langstaff, Veta Markley, Elizabeth G. Mullen; to Yokohama, Japan, Edith N. Lindquist, Chief Nurse U. S. N., Nellie E. Truthart.

The following nurses have been appointed *Chief Nurses:* Katherine M. Gallagher, Ruth M. Anderson.

Honorable Discharge: Ethel E. Briggs, Mabel H. Gommel.

Resignations: Gertrude L. Griffith, Mildred E. Hoover, Mandy C. Melcum.

J. BRATHEN BOWMAN,
Superintendent, Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE NURSE CORPS

Transfers: Minnie Goodwin, Chief Nurse, to U. S. Marine Hospital No. 1, Baltimore, Md.; Katherine Taulbee, to Chief Nurse, U. S. Marine Hospital No. 9, Ft. Stanton, N. M.;

Mary McSweeney, Acting Chief Nurse, to Cleveland, Ohio; Erma G. Morrison, Actg. Chief Nurse, to Hospital No. 18, St. Louis; Margaret Farrell, to No. 16, Portland, Me.; Jennie Guzman, to Hospital No. 10, Key West, Fla.; Marjorie Walton, to Hospital No. 32, Norfolk, Va.; Nora Spencer, Virginia Mooney, to Hospital No. 12, Memphis, Tenn.; Ida Holbrook, Eva Bowman, to Hospital No. 13, Mobile, Ala.; Mary Williams, Eva Knight, Irene Brown, to Hospital No. 19, San Francisco; Amelia Holmes, to Hospital No. 14, New Orleans; Minnie Sweetman, to Hospital No. 20, Savannah, Ga.; Agnes Lynch, to Hospital No. 15, Pittsburgh, Pa.

Reinstatements: Elizabeth Burke, Bertha Leake, Gaynelle Flaks.

Foreign Quarantine Division: Ethel Cameron, Anna Svenson, to U. S. Quarantine Station, Rosebank, N. Y.

LUCY MINNIGERODE,
Superintendent of Nurses,
U. S. Public Health Service.

U. S. VETERANS' BUREAU NURSING SERVICE

Hospital Service. Transfers: Anne K. Pilegard, to No. 50, Whipple Barracks, Ariz.; Eugenia L. Acervo, to No. 25, Houston, Texas; Grace A. Pengilly, to No. 26, Greenville, S. C.; Elsie A. Orr, Edith M. Prince, to No. 30, Chicago; Lucy W. Jeffrey, Mary McCallan, to No. 32, Washington, D. C.; Winifred McGuire, Clara J. Anderson, to No. 16, Maywood, Ill.; Bertha M. Jones, C.N., to No. 41, New Haven, Conn.; Charlotte F. Macallister, Asst. C. N., to No. 51, Tucson, Ariz.; Alma Wrigley, C.N., to No. 86, Ft. McKean, Wyo.; Kathleen V. Dorsey, C.N., to No. 62, Augusta, Ga.

Reinstatements: Gertrude G. Hard, Grace Parley, Olive M. Hallmart, Anna L. Kearney, Mabel L. Baumertthal, Beatrice Clary, Ethel Franch, Rachel Hamilton, Mary A. Herring, Margaret B. Davis, Edith C. Anderson, Bertha E. Tobey.

District Medical Service. Transfers: Florence Forney, to District No. 1, Portland, Me.; Anabel Marker, to District No. 11, Denver, Colo.

During the month thirty nurses—fifteen from the Hospital Service and fifteen from the District Medical Service—were assigned to take

the second postgraduate course in Psychiatry which began March 5, given by the U. S. Veterans' Bureau at St. Elizabeth's Hospital, Washington, D. C.

At the formal opening, Dr. Frank Hutchins, Chief Consultant in Neuro-Psychiatry, U. S. Veterans' Bureau, presided. Clara D. Noyes, Director of the American Red Cross Nursing Service, spoke on the advantage to nurses of organization and the unusual opportunity being given to them by the U. S. Veterans' Bureau to come to St. Elizabeth's Hospital to become more familiar with the different phases of mental diseases. Lucy Minnigerode extended to the nurses greetings from the U. S. Public Health Service and emphasized the unusual opportunity the nurses were having to take part in this epochal work in Psychiatry being given by the U. S. Veterans' Bureau. Colonel Ijams, Executive Officer, U. S. Veterans' Bureau, spoke on the desire of the Bureau to give to their beneficiaries the most efficient care possible and the great need of the Bureau for personnel especially trained in Psychiatry.

Harriet Bailey, Educational Director, Bellevue Hospital, New York City, was detailed by the U. S. Veterans' Bureau to St. Elizabeth's Hospital, Washington, D. C., for the purpose of giving lectures in Psychiatric Nursing to the nurses taking the course. Amelia J. Massopust, Social Worker in Psychiatry of the Manhattan State Hospital, New York, was detailed by the U. S. Veterans' Bureau to the course in Psychiatric Nursing in Washington, D. C., for a series of lectures on March 29, 30 and 31, 1923.

Fifteen nurses from the Hospital Service and fifteen from the District Medical Service were also detailed to take the first course in Tuberculosis Nursing at U. S. Veterans' Hospital No. 41, New Haven, Connecticut. Alice E. Stewart, Director, Tuberculosis League of Pittsburgh, was detailed as Instructor in Tuberculosis Nursing. Lectures in Public Health Nursing are being given by the Executive Staff of the New Haven Visiting Nursing Association.

In giving these courses to the nurses in the U. S. Veterans' Bureau Nursing Service, the nurses are enabled to have proper instruction and are given the opportunity for the application of the principles taught and actual

practice on the wards. It is felt that nurses returning to their various stations will be far more valuable in their respective work and will render to the U. S. Veterans' Bureau a much more intelligent and efficient service. It is also felt that the opportunity these nurses will have of making contact at this time with physicians and other nurses in their respective fields, who are enthusiastic over their work, can hardly be estimated.

During the month the hospital at Jefferson Barracks, Missouri, was opened for the reception of patients.

MARY A. HICKEY,
Superintendent of Nurses,
U. S. Veterans' Bureau.

The Trained Nurse and Hospital Review is offering a scholarship of \$200, open to nurses who have graduated from accredited schools between July 1, 1922 and July 1, 1923. This will give opportunity to the winner to study in some college or university for a year; she may choose the field in which she is most interested. The award will be made by a Scholarship Committee composed of representative nurses. Details may be obtained from the editor of *The Trained Nurse*, 342 Madison Avenue, New York.

Alabama: THE NURSES' BOARD OF EXAMINATION AND REGISTRATION OF ALABAMA will hold an examination for the registration of Nurses in Birmingham, June 25 and 26, in Montgomery, June 27 and 28; in Mobile June 29 and 30. All applications and credentials, with photograph, must be filed with the Secretary-Treasurer at least fifteen days prior to the date set for the examination. Application blanks may be secured from the Secretary-Treasurer, Linna H. Denny, 1806 North 7th Avenue, Birmingham. Kodak pictures will not be accepted.

California: POMONA.—THE GRADUATE NURSES' ASSOCIATION, DISTRICT NO. 19, was organized in May, 1922, with 35 members. Officers are: President, Rose Parrott; secretary, Caroline Stinewart; treasurer, Kate Urban; chairman Relief Fund Committee, Anna Henderson. Regular meetings are held at the Nurses' Home, the first Tuesday of each month. In February of this year a bazaar was held to raise money for the Relief Fund. \$109.23 was cleared. Oakland.—

FARIOLA HOSPITAL ASSOCIATION holds its commencement exercises May first; twenty-four nurses graduate.

Colorado: THE COLORADO STATE BOARD OF NURSE EXAMINERS will hold an examination to register nurses at the State House, Denver, on May 22, 23, and 24, 1923. For further information apply to the Secretary, Louise Ferrin, State House, Denver.

Connecticut: Derby.—THE GRIFFIN HOSPITAL held commencement exercises April 12; seven nurses graduated. New Haven.—THE CONNECTICUT TRAINING SCHOOL ALUMNAE ASSOCIATION is planning a two-day celebration of the semi-centennial of the School on Tuesday and Wednesday, May 15 and 16. The hospital and school are in cordial collaboration; committees have been appointed. All graduates are most cordially invited to return.

District of Columbia: THE NURSES' EXAMINING BOARD OF THE DISTRICT OF COLUMBIA will hold an examination for registration of nurses, May 8, at the District Building. All applications should be sent to Mary E. Graham, Secretary and treasurer, 1337 K Street, N. W., Washington. THE GRADUATE NURSES' ASSOCIATION OF THE DISTRICT OF COLUMBIA will hold its annual meeting on May 7, at 1337 K Street, N. W., Washington, at 3 p. m. The election of officers for 1923-24 will be in order. It is hoped, also, that the Legislative Committee appointed by the President will be prepared to make a statement to the members on the proposed revision of the Nurse Practice Act of the District. Washington.—GARFIELD MEMORIAL HOSPITAL will hold its commencement exercises May 1; twenty nurses will graduate.

Florida: THE FLORIDA STATE EXAMINING BOARD OF NURSES will hold an examination for applicants for registration of Graduate Nurses June 18 and 19, and for Licensed Attendants June 20, at the Seminole Hotel, Jacksonville. All applications should be filed fifteen days previous to date of examination with the Secretary, Louisa B. Benham, Hawthorne, Florida. Jacksonville.—BREWSTER HOSPITAL will hold its commencement exercises May 12; four nurses will graduate. Tampa.—DISTRICT 4 held a regular meeting in the Nurses' Home of Gordon Keller Hospital. Chairmen of committees were

appointed as follows: Credential, John O. Johnson; Nominating, Lillian Hollohan; Red Cross, John O. Johnson; Nurses' Relief Fund, Pearl Means; Publication and Press, Mrs. H. Ryland Cox; Entertainment, Marcia Jones; Floral and Sick, Mrs. Arrowsmith.

Idaho: THE IDAHO STATE ASSOCIATION OF GRADUATE NURSES held its annual meeting in March, in Boise, and elected the following officers: President, Barbara Williams, St. Luke's Hospital; vice-presidents, Beatrice Reichert, Vivian Schutt; secretary, Louise W. Gerrish, St. Luke's Hospital; treasurer, Mrs. Emma Amack Meier,—all of Boise.

Illinois: Chicago.—THE ILLINOIS LEAGUE OF NURSING EDUCATION held a meeting on March 15 at which a paper on Teaching Pediatrics to Student Nurses was given by Dr. Gibson. Two students took part in a discussion on Student Government. THE INDUSTRIAL NURSES' SECTION held a meeting on March 9, when Dr. G. L. Ostrosky spoke on The Industrial Nurse and Educator. Miss Rounsie spoke on Junket and Its Value. Margaret McGreevey, formerly of Lincoln, Nebraska, has become Field Director for the Red Cross Nursing Service for Illinois. THE JANE DELANO POST holds a meeting at the Nurses' Club on the first Monday evening of each month. All Service nurses are welcome. St. Joseph's Hospital ALUMNAE held its annual meeting on February 2, electing the following officers: President, Margaret Pillion; vice-presidents, Catherine Graf, Frances O'Neill; corresponding secretary, Maud Lee; recording secretary, Julia Feeley; treasurer, Annie Greene. THE PRESBYTERIAN HOSPITAL ALUMNAE ASSOCIATION held its annual meeting in January, electing the following officers: President, Mary L. Morley; vice-presidents, Lila Fletcher, Edna McCullough; treasurer, Lelia Townsend; recording secretary, Ethel Armstrong; corresponding secretary, Flo Bronson; directors, Mrs. L. C. Gatewood, Mrs. George Sutherland, Mary Cutler and Helen Denne. The annual concert of the Florence Nightingale Chorus Presbyterian Hospital, was given on February 27 in the Crystal Room of the Blackstone Hotel. It was a great success and well attended. The proceeds will be used to swell the Endowment Fund for the School for Nurses started a year and

a half ago. THE SWEDISH COVENANT HOSPITAL will hold graduating exercises for a class of eleven on May 23. The hospital is making a gift of one year's subscription to the *Journal* to each member. MERCY HOSPITAL GRADUATES are reported as follows: Laura Mongeau is head nurse at the hospital; Rosina Rauh is on the staff of nurses of the Municipal Tuberculosis Sanatorium; Grace Toubey is an industrial nurse with the National Biscuit Company; Loretta Smith and Grace Crahen are doing Infant Welfare nursing; Pansy Richardson has a position at the Infirmary of the University, Madison, Wis.; Elizabeth Sheridan is assistant superintendent of nurses at St. Vincent's Infirmary, Little Rock, Ark.; Daisy Bradley and Ada Connor are doing life insurance work. ST. ANNE'S ALUMNAE ASSOCIATION held a tea dance at the Nurses' Club, April 4, which was a great success. On May 2, a card party will be held at the Nurses' Home. A hope chest is on exhibition at the Home. Chances are being sold and the proceeds will be used as a contribution toward the cottage for tuberculous nurses at Naperville. Florence Padden, class of 1921, has joined the Visiting Nurse Association. **Mattoon.**—THE ALUMNAE ASSOCIATION OF THE MEMORIAL METHODIST HOSPITAL has recently been formed, with fourteen members. Officers are: President, Edith B. Kyle; vice-president, Myrtle Kimbrough; secretary, Bernice O. Swain; treasurer, Carrie Ferguson; directors, Myrtle King, Grace Delap.

Indiana: INSTITUTES ON MATERNAL AND INFANT HYGIENE FOR PUBLIC HEALTH NURSES will be held in the state of Indiana during the month of May. These institutes are being planned by the Child Hygiene Division of the State Board of Health through the Department of Public Health Nursing, in coöperation with the Children's Bureau, U. S. Department of Labor. The purpose of the institutes is to further the interests of all public health nurses in maternal and infant hygiene, and to standardize instruction for mothers' classes. Methods of care and instruction, and fineness of technic will be presented as related to home conditions. Marie T. Phelan, consulting Public Health Nurse of the Children's Bureau and Mary J. Horn of the Department of Public Health Nursing will be among the

nurse instructors. The places and dates of meeting are as follows: Evansville, May 3, 4, 5; Indianapolis, May 7, 8, 9; Fort Wayne, May 10, 11, 12; South Bend, May 14, 15, 16; Hammond, May 17, 18, 19; Lafayette, May 21, 22, 23. Indianapolis.—THE NURSES' CENTRAL DIRECTORY, which had been located at 12 Bungalow Park for ten years moved to an apartment at 234 East Pratt Street, December 17. The Directory now has 215 nurses registered for private duty and a number for institutional positions; 1532 calls were received for nurses from January 1 to April 1. THE W. B. FLETCHER HOSPITAL ALUMNAE ASSOCIATION gave a dance at the Spink Arms Hotel April 7, for the James Whitcomb Riley Memorial Hospital; about \$200 was realized. At the annual meeting of the INDIANAPOLIS CITY HOSPITAL NURSES' ALUMNAE ASSOCIATION the following officers were elected. President, Rebecca Wilkinson; vice-presidents, Mrs. Mable Huggins, Hope Fuller; secretary, Ila Anderson, City Hospital; treasurer, Mary Lybrook. Following the business meeting the members were the guests of Josephine Mullville, Superintendent of Nurses, at a spring tea. Miss Mullville was assisted by the members of the Senior class. The Alumnae Association will give a dance and card party in May to raise money to furnish the Alumnae Reception Room in the new Nurses' Home which is fast nearing completion.

Iowa: Des Moines.—THE SEVENTH DISTRICT nurses had a dinner and meeting on April 5 with 50 present. Dr. Wingart gave a very interesting talk on Heredity. A collection was taken for the Jane A. Delano Memorial Fund with 100 per cent of the Seventh District contributing.

Kansas: El Dorado.—ST. LUKE'S HOSPITAL will hold its commencement exercises in May; three nurses will graduate.

Kentucky: Hopkinsville.—JENNIE STUART MEMORIAL HOSPITAL held its commencement exercises April first; four nurses graduated.

Louisiana: At the recent meeting of the LOUISIANA STATE NURSES' ASSOCIATION the following officers were elected: President, Mrs. Lydia Breaux, 521 South Hennessy Street, New Orleans; secretary, Mrs. Clara

McDonald, 1624 Marigny Street, New Orleans.

Maryland: Baltimore.—THE UNIVERSITY HOSPITAL NURSES' ALUMNAE BULLETIN gives a beautiful picture and a sketch of Louisa Parsons, an English nurse, who did pioneer work both in this country and in England. Miss Parsons was the first superintendent of nurses of the University Hospital Training School. She had done Army nursing in the Sudan, the Boer War, the Spanish-American War, and she had done Red Cross work under Miss Barton. The medals she had received were presented to the Alumnae Association at the time of the dedication of the new nurses' home on November 16.

Massachusetts: At the mid-winter meeting of the STATE ASSOCIATION, the Legislative Committee, with Sally Johnson as chairman, reported that a bill has been drawn up, providing chiefly for an Educational Director, and the licensing of nursing attendants. The bill will not be presented to the legislature until another year. Mrs. Susan L. Briggs, of the Massachusetts General Hospital Alumnae Association, has been retained as full time worker for the Legislative Campaign. THE NEW ENGLAND INDUSTRIAL NURSES' ASSOCIATION with headquarters at 3 Joy Street, held its annual business meeting January 15, immediately followed by a dinner, address, and music at the Twentieth Century Club Rooms. Dr. Alice Hamilton, instructor in Industrial Poisons at Harvard University, was the speaker. The speaker for the February meeting was taken suddenly ill at the last minute, so the members held an informal meeting, talking over problems relative to their respective plants. The March meeting was the regular "Open Meeting" with no speaker. Letters were read from absent members and those present told of constructive health work being done in their particular plants. THE ALUMNAE ASSOCIATION OF THE MASSACHUSETTS HOMOEOPATHIC HOSPITAL, at the March meeting, enjoyed a talk on Insulin Treatment of Diabetes by Miss Mudge. After the meeting a reception was given to the graduating class. Winifred Monroe is night supervisor at Emerson Hospital, Forest Hills. Sarah N. Higgins has resigned her position at St. Luke's Hospital, St. Paul,

and will rest at her home in Lynn, Cambridge.—**THE CAMBRIDGE HOSPITAL NURSES' ALUMNAE ASSOCIATION** held its annual meeting on January 22 and elected the following officers: President, Jennette G. MacKenzie; vice-presidents, Katherine A. Sturgeon, Jane R. Patchell; secretary, Mrs. Helen R. Hollis; treasurer, Elizabeth M. Leydon. Lawrenson.—**Ida Washburne** succeeds Miss Catton as Superintendent of the Lawrence General Hospital. **Pittsfield**.—**THE BERKSHIRE COUNTY BRANCH OF THE STATE ASSOCIATION** met on March 24 at the Bishop Building. Bernice Billings of the Boston Tuberculosis Association was the speaker. **THE HOUSE OF MERCY ALUMNAE ASSOCIATION** met on March 7, at the Alumnae House. After the business meeting, a paper on The Subconscious was read by Harry G. Mellen, M.D. **THE HILLCREST HOSPITAL ALUMNAE ASSOCIATION** met on March 7 and revised its by-laws to meet the requirements of the State Association. Officers were elected: President, F. H. Norman; secretary, Elizabeth Humphrey; treasurer, Helen Kupinski. The association has been made a member of the State Association. **Attleboro**.—**STURDY MEMORIAL HOSPITAL** will hold its commencement exercises in May; five nurses will graduate. **Greenfield**.—**THE FRANKLIN COUNTY PUBLIC HOSPITAL** held its commencement exercises in April; three nurses graduated. **Winchester**.—**THE WINCHESTER HOSPITAL** held commencement exercises in April; five nurses graduated. **Worcester**.—**THE ALUMNAE ASSOCIATION OF THE WORCESTER STATE HOSPITAL** held its regular meeting at the Hale House on April 10. The New Operating Room and X-ray Department was the subject of an interesting paper by Jennie Leight, and the Alumnae members were pleased to learn that the Worcester State Hospital X-ray department has been rated second best in New England. The Association voted to establish a permanent prize of ten dollars in gold to be presented each year to the Senior nurse writing the best paper on any phase of psychiatric nursing. The prize is to be known as the "Linda Richards Prize," in honor of Linda Richards, who first organized the Training School. The Association also voted to present a prize of ten dollars in gold to the Senior nurse ranking highest

in her class. Both prizes are to be presented at the graduation exercises in June. **THE WORCESTER CITY HOSPITAL** held commencement exercises in April; five nurses graduated.

Michigan: **THE MICHIGAN BOARD OF REGISTRATION OF NURSES AND TRAINED ATTENDANTS** will hold an examination in Lansing, June 27 and 28. Mrs. Helen de Spelder Moore, secretary. **THE MICHIGAN STATE NURSES' ASSOCIATION** will hold its nineteenth annual meeting at the Edgewater Club House, St. Joseph, May 23, 24, 25. Reservations should be made at once with Henrietta M. Schoenbeck, St. Joseph, Chairman of the Local Arrangements Committee, as the space at the club house is limited. The rates are \$5 a day American Plan, which includes room and board. One of the most outstanding events will be a Red Cross dinner on the evening of the 23rd when Major Lucy Minnigerode, Washington, D. C., will be present. Following the dinner, Adda Eldredge, president of the American Nurses' Association, will address the meeting. Other speakers of note are Prof. Allen Hoben, Kalamazoo College; Mrs. Dorian Russell, president Michigan Federation of Women's Clubs; Mark T. McKee, attorney, Detroit. On the 24th, Emily A. McLaughlin, chairman of the Arrangements Committee for the biennial convention of the American Nurses' Association, 1924, will preside at a luncheon meeting when the plans for the convention will be discussed. On the third day, every phase of nursing service will be taken up at round table conferences. Mrs. Elsbeth Hosig Vaughan, Children's Bureau, Lansing, is chairman of the Programme Committee. Sarah E. Sly, Birmingham, chairman of the Finance Committee, biennial convention, 1924, visited the following cities during January and March: Battle Creek, Jackson, Muskegon, Kalamazoo, Grand Rapids, Flint, Lansing, Saginaw, Bay City, Ann Arbor, Port Huron. Addresses were given to groups of pupil nurses on The Nurse's Responsibility to Her Alumnae Association. Parliamentary drills were given the District groups and plans for the coming state and national conventions were presented. A meeting of the Board of Directors of the State League was held at McLaughlin Hall, March 16. Plans for a summer institute were discussed. This institute

will be held in Detroit in June for five days. **Detroit.**—The Board of Trustees of the VISITING NURSES' ASSOCIATION gave a dinner on the evening of April 13, in celebration of the twenty-fifth anniversary of the founding of the association. Professor C. E. A. Winslow of Yale University spoke on Public Health Nursing. More than 500 guests were present, among them 250 nurses in uniform. All speakers paid tribute to the beloved Superintendent of the Association, Mrs. Lystra E. Gretter, who has been an inspiration to her associates and colleagues for the past fifteen years. A City Conference of Social Work has been planned by the Detroit Community Union to be held June 6, 7 and 8. The conference has been divided into seven general groups as follows: Community Organization, Child Welfare, Family Welfare, Health, Recreation, Delinquency, Mental Hygiene. Katharine Kimmick, Superintendent of Nurses, Ford Hospital, discussed the Report on the Rockefeller Foundation at the Detroit Local League of Nursing Education, April 10. The regular meeting of the FARRAND TRAINING SCHOOL ALUMNAE ASSOCIATION was held at McLaughlin Hall, April 10. Arrangements were completed for the annual banquet to the graduating class, at the Statler Hotel, April 30. At the regular meeting of the FIRST DISTRICT ASSOCIATION, Grace Ross of the Board of Health spoke. **Ann Arbor.**—THE SECOND DISTRICT ASSOCIATION met on March 16 at the University Hospital and listened to an excellent talk on Nursing Organizations by Sarah E. Sly, General Secretary of the State Association. Miss Sly also outlined plans for the National Meeting in 1924. The Campaign Committee for the SECOND DISTRICT met on March 22 at the home of Mrs. C. L. Washburn, to make plans for the raising of funds for the convention. **Battle Creek.**—Prof. Barbara H. Bartlett of Ann Arbor, president of the Michigan State Nurses' Association addressed the members of the THIRD DISTRICT ASSOCIATION, faculty members, and local nurses at a meeting held at the Sanitarium March 26. The subject of her talk was Opportunities in the Field of Nursing. Following the meeting the annual banquet of the association was held. The regular monthly meeting of the NICHOLS MEMORIAL TRAINING

SCHOOL ALUMNAE was held March 6 at the Nurses' Lodge, 182 W. VanBuren Street. There was a good attendance, seventeen being present. One of the principal items of business taken up was the matter of the biennial convention of the American Nurses' Association, to be held at Detroit next year. Mrs. Effie Tyrrel, President of this District, presented the matter and Mrs. John Hunter, city nurse, was appointed chairman of the Booster Committee in connection with this gathering. The local alumnae voted to cooperate with the District in the sale of theatre tickets, money from which is to be used for furthering the work of the District Nurses' Association. **BATTLE CREEK SANITARIUM NURSES' ALUMNAE ASSOCIATION.**—At the March meeting it was voted to add gold to the present colors, blue and white, and to adopt the violet for the association flower. The Booster Committee reported \$105.65 in hand for the biennial convention, and further plans on foot to raise more money for this purpose. It was voted to send \$25 out of the treasury for the Jane A. Delano Memorial Fund. A very profitable parliamentary drill was conducted by one of the members. **Flint.**—THE EIGHTH DISTRICT ASSOCIATION held a dinner meeting at which a splendid address was given by Sarah E. Sly, outlining the history of women's organizations, and our own nursing associations. She spoke of the Jane A. Delano fund, and the inspiration derived from such a memorial as is planned. She then gave the four main objectives of the State Association for the year,—Increased Membership, Publicity, State and Biennial Programmes, *Journal* Subscriptions. Easter Day marked the opening of the new Women's Hospital on Lapeer Street. The people of Flint are singularly fortunate in having secured Fantine Pemberton as Superintendent. Miss Pemberton is from the University Hospital, Ann Arbor, and was for over ten years Superintendent of Dr. Peterson's Hospital in Ann Arbor, where she established a Training School for Nurses. Following this she was Superintendent of Nurses at the University Hospital for three years. Miss Pemberton then retired from active nursing service for a time, during which time she had many urgent requests to return to the field, and was finally

prevailed upon to come to Flint. Miss Pemberton brings with her a corps of able assistants, Ildah Brinsmade, dietitian, from the Boston Cooking School; Rhea Dixon, from Dr. Peterson's Hospital, as operating room supervisor. Miss Dixon was formerly with the Ford Hospital in Detroit. Laura Zink, of Worcester Memorial, will have charge of Maternity. Miss Zink is now with the Women's Hospital on Harrison Street. Helen Burns and Agnes Laughran come from Duluth, Minn. Miss Pemberton has for many years been an outstanding figure in the State Association and the Eighth District extends a hearty welcome to her and her staff. Port Huron.—A very interesting and inspiring meeting was held in DISTRICT No. 9, March 19, at the Port Huron Hospital, when thirty nurses and several guests had the honor and pleasure of entertaining Sarah E. Sly, General Secretary of the State Association. Miss Sly very ably presented the subject of Organization. As Miss Sly is Chairman of the Finance Committee of the 1924 Biennial Convention she urged combined effort in work and finances to make the 1924 Convention a success and a credit to all the nurses in the State. Saginaw.—THE ELEVENTH DISTRICT of the State Association elected officers for the year, October, 1922, as follows: President, Laura E. Thomas; vice-presidents, Josephine Early, Grace Pritchard; corresponding secretary, Laura Senay; recording secretary, Elnora Howard; treasurer, Jane Taggart. At this meeting the programme for the year was launched: Twelve captains were appointed, one to have charge of each month's meeting; three nurses were appointed on each of the twelve teams, judges were appointed. At the end of the year a banquet is to be given, by the District, to the team which has given the best programme. Following is the programme up to date: November, 1922: Dr. De Kline, our new and first full-time health officer gave a very instructive resume of his work. Mrs. de Spelder Moore told us something of the Seattle convention, particularly of Michigan's spectacular landing of the 1924 Biennial meeting. December: Wilhelmina Green, probation officer, sketched graphically her duties, in the city and county, in connection with our Welfare League. January, 1923: Dr.

Lafon Jones, at the head of the schools in Flint, told us instructively of the duties of the school nurse. February: Dr. J. D. Bruce, Saginaw, gave an educational talk on the increase of Kidney and Heart Diseases. March: Sarah E. Sly outlined illuminatingly the plan, growth and extension of the A.N.A. and visioned her present work as a helping hand to the Districts. A Booster Committee, to raise funds for the District's quota for the Biennial, 1924, was appointed. Chairman, Frances Scott; Supt. Saginaw General Hospital. For this purpose a subscription card party was given, clearing \$200. April is to be a "surprise party." The District has a membership of about one hundred. During this year there has been an attendance of from thirty to forty, and marked interest and coöperation are manifest. While there is a regular meeting place, the members "meet around" at the hospitals, and other interesting places, and usually tuck in a social hour. The District is anxious to become at least an intermittent subscriber to the Michigan page of the *Journal*. Grand Rapids.—The staff of the VISITING NURSE ASSOCIATION consists of a superintendent, an assistant superintendent, eight field nurses, one nurse called "a floater," who helps out wherever she is needed, one full time industrial nurse who spends all her time in the factory, and two nurses who are on duty in the new department which is called "Twenty-four Hour Maternity Service." By this service nurses are sent out to the homes to attend labor cases any hour of the night or day, Sundays and holidays included; one of these nurses also does the pre-natal work. With this small force a big piece of work was accomplished during 1922. Six years ago when the Association started to do Industrial Nursing, there was no nursing of this type in Grand Rapids, but now there are four factories that have put in industrial nurses besides those supervised by the Association. Emma Sater, graduate of the Presbyterian Hospital, Chicago, recently superintendent of Christ Church Hospital, Kansas City, Mo., has accepted the position of superintendent of nurses of the Butterworth Hospital.

Minnesota: THE MINNESOTA STATE REGISTERED NURSES' ASSOCIATION will hold its spring

meeting at the Curtis Hotel, Minneapolis, at 2:30 p. m., May 19. Adda Eldredge, President of the American Nurses' Association, will be the guest of the Association and give an address at this meeting which will be followed by an informal reception and banquet. Reservations for the banquet should be made with Louise Kellogg, 681 Curtis Hotel, by May 14. The amended bill for state registration of nurses passed both houses of the legislature and was signed by the Governor on April 4. The text follows:

A Bill for an Act to Amend Sections 5000, 5002, 5003, 5004, 5005, 5006 and 5009, General Statutes of Minnesota for 1913.

Be it enacted by the Legislature of the State of Minnesota:

Section 1. That section 5000, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5000. A board of examiners to consist of five persons (ONE OF WHOM SHALL BE A REGULAR LICENSED PHYSICIAN) is hereby created to carry out the purposes and enforce the provisions of this act. Said board shall be appointed by the governor, and the (OTHER) appointments shall be made from nurses engaged in active work who have been graduated for at least a period of five years from reputable training schools, and whose course of training is not less than three years' duration in actual hospital service, provided, that there shall always be two of said members on said board selected from nurses who have had at least two years' experience in educational work among nurses, or who have had two or more years' experience in the instruction of nurses in training schools; and provided, further that after the appointment of the first board the nurses appointed on each succeeding board shall be appointed from the nurses registered under this act.

Sec. 2. That section 5002, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5002. Said board shall elect from its members a president, a secretary and a treasurer, and shall have its headquarters at St. Paul, Minn.; shall have a common seal, and the secretary and president shall have power to administer oaths. The treasurer

shall give bond in the sum of \$2000.00. Said board may appoint an educational director.

Sec. 3. That section 5003, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5003. Each member of said board shall receive a compensation of five dollars per day for each day of actual service, and ten cents per mile for each mile actually traveled in attending the meetings of the board; said board may fix the salary of its secretary and the educational director, which salaries, compensation and expenses shall be paid out of any moneys in the hands of the treasurer of said board, provided that said compensation, salaries and expenses, and mileage, shall in no event be paid out of the state treasury.

Sec. 4. That section 5004, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5004. Any money in the hands of the treasurer at the end of any year in excess of (TWO HUNDRED AND FIFTY DOLLARS) \$2000.00 shall be paid over by said board to the state treasurer, to be kept by him for the future maintenance of the board, and to be disbursed by him upon warrants signed by the president and treasurer of said board.

Sec. 5. That section 5005, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5005. Said board shall hold public examinations at least once in every year (AT ST. PAUL, MINNESOTA, AND) and at such times and places as it may determine, and notice of the time and place of such examination shall be given by a publication thereof at least ten days before such examination, in a daily newspaper published at the capital of the state, and said board may give such other notice as it deems advisable. Any person desiring to obtain a certificate of registration under this act shall make application to said board therefor, and shall pay to the treasurer of said board an examination fee of (FIVE DOLLARS) \$15.00, and shall present himself or herself at the next regular meeting of said board for examination of applicants, and upon said board being satisfied that the applicant is (1) of the age of twenty-one years or over, (2) of good moral character,

(3) has received an education equivalent to that required for admission into high schools of this state, and (4) has graduated from a training school connected with a general hospital where three years of training, with a systematic course of instruction is given in the hospital, or has graduated from a training school in connection with a hospital of good standing supplying a systematic three years' training corresponding to the above standards, which training may be obtained in two or more hospitals, said board shall proceed to examine said applicant in both theoretical and practical nursing, and upon such applicant passing said examination to the satisfaction of said board, said board shall enter said applicant's name in the register, hereinafter provided for, and shall issue to said person a certificate of registration authorizing said person to practice the profession of nursing as a "registered nurse."

Sec. 6. That section 5006, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5006. (ALL NURSES GRADUATING PRIOR TO JANUARY 1, 1910, POSSESSING THE ABOVE QUALIFICATIONS, SHALL BE PERMITTED TO REGISTER WITHOUT EXAMINATION UPON PAYMENT OF THE REGISTRATION FEE. NURSES WHO SHALL SHOW TO THE SATISFACTION OF THE BOARD OF EXAMINERS THAT THEY ARE GRADUATES OF TRAINING SCHOOLS CONNECTED WITH A GENERAL HOSPITAL OR SANITARIUM GIVING TWO YEARS' TRAINING, PRIOR TO THE YEAR 1897, HAVING GIVEN ONE YEAR'S TRAINING, AND WHO MAINTAIN IN OTHER RESPECTS PROPER STANDARDS, AND ARE ENGAGED IN PROFESSIONAL NURSING AT THE DATE OF THE PASSAGE OF THIS ACT, OR HAVE BEEN ENGAGED IN NURSING FIVE YEARS AFTER GRADUATION, PRIOR TO THE PASSAGE OF THIS ACT, ALSO THOSE WHO ARE IN TRAINING AT THE TIME OF THE PASSAGE OF THIS ACT, AND SHALL GRADUATE HEREAFTER, AND POSSESS THE ABOVE QUALIFICATIONS, SHALL BE ENTITLED TO REGISTRATION WITHOUT EXAMINATION; PROVIDED SUCH APPLICA-

TION BE MADE BEFORE JANUARY 1, 1910.) All nurses graduating prior to Jan. 1, 1918, and having had five years actual experience in nursing, who shall on or before the first day of August, 1923 make application and produce to the board satisfactory evidence verified by the oath of the applicant that the applicant, during all of the year 1923, was and is a legal resident of this state and a graduate of a school of nursing meeting with the approval of said board, and giving a course in nursing of not less than two years, shall be permitted to register without examination upon payment of the registration fee. This shall not apply to nurses registered prior to the passage of this act.

Sec. 7. That section 5009, General Statutes, Minnesota, 1913, be and the same is hereby amended so as to read as follows:

"5009. The board of examiners may issue license without examination, upon the payment of (FIVE DOLLARS) \$15.00 registration fee, to applicants (WHO HAVE BEEN REGISTERED IN OTHER STATES HAVING EQUAL REQUIREMENTS.) from another state or foreign country whose qualifications are equivalent to those required by this act, and who shall produce to said board satisfactory evidence verified by the oath of the applicant of the fact that said applicant was duly licensed by said state or foreign country to practice therein as a registered nurse.

Sec. 8. This act shall take effect and be in force from and after its passage.

Third District, Minneapolis.—THE INSTITUTIONAL SECTION had charge of the March meeting of the district which was held at St. Paul's Parish House. A lecture on Psychology by Prof. R. O. Filter of the University was much appreciated. Refreshments were served to over 300 members. Owing to illness in her family, Anna Westley has had to give up her work in the nursing world, and is at Cooperstown, N. D., caring for her brother's family. Miss Westley has been Registrar for the Third District for the past three years and was given leave of absence last November in order that she might devote her whole time to the legislative programme of the State Association. Much credit is due Miss Westley for the successful growth of the Registry.

while her executive ability, tact, and sense of justice, made of her a valuable worker, and her going away is a real loss. Miss Westley also proved herself an able "lobbyist," and secured the coveted amendments to our Nurse Practice Act. Edith A. Barber, who has been Assistant Director of Nurses at the General Hospital since February, 1920, resigned and has gone east for a much needed rest. She is succeeded by Irene Wabbe, graduate of the Illinois Training School. Frances Madigan, graduate of the University School of Nursing, has accepted the position of Instructor at the General with Helen Erickson, graduate of Johns Hopkins as Assistant. Ragnhilde Pjeldenes has returned to the University Hospital staff as clinic nurse in the nose and throat dispensary. Pearl McIvor has succeeded Alma Wrentling as State Director of Public Health Nurses in Missouri. Dora Peterson is head of one of the three substations of the Minneapolis Visiting Nurse Association. Fourth District, St. Paul.—THE PRIVATE DUTY SECTION had charge of the programme at the April meeting of the District. The next meeting of the Section will be held at the City and County Hospital, St. Paul. The District voted to contribute \$100 to the Delano Memorial Fund. Edith Thornquist has resigned as Superintendent of Nurses at Mounds Park and Allied Hospitals, and is succeeded by Marie Danielson, graduate of Mounds Park School of Nursing. Sarah Higgins has resigned as Superintendent of Nurses, at St. Luke's, and is taking a much needed rest. She is succeeded by Elizabeth Meyer, graduate of the Miami Valley Hospital, Dayton, Ohio. Alma Johnson, formerly Red Cross Nurse in Grant County, is now public health nurse for Luce County, Michigan, with headquarters at Newberry. Graduates of Bethesda Hospital are reported as follows: Ejelive Hegtreid has accepted a position as X-ray technician at the State Hospital for Crippled Children, Phalen Park. Christine Erickson, class of 1915, is home on furlough from the mission fields of India. Ruth Bergman is anesthetist at the St. Paul Hospital. Marie Floren is surgical supervisor at the Lakeview Memorial Hospital, Stillwater. Martha Foss is superintendent of nurses at Northwestern Hospital, Brainerd.

Selma Swanson left April 6 for the mission field at Moshi, British East Africa. THE BETHESDA HOSPITAL held its commencement exercises in April; fifteen nurses graduated. MOUNDS PARK SANITARIUM AND HOSPITAL held its commencement exercises in April; nineteen nurses graduated. Sixth District, Rochester.—ST. MARY'S ALUMNAE ASSOCIATION held the annual meeting in January and elected officers as follows: President, Gertrude Hanson; vice-president, Nettie Nolan; recording secretary, Mary Lawler; corresponding secretary, Pearl Rousseau; treasurer, Mary Brinbols; directors, Sister M. Virginia, Catherine Coleman. May 28, 29 and 30 have been selected as the dates for the Home Coming of the Alumnae Association, the first in its history; each class anticipates a 100 per cent. attendance. Mary Hannaway has taken charge of the Training School in the Providence Hospital, Sandusky, Ohio. Ethel Erickson is taking a post graduate course at the Lying-in Hospital, Chicago. Bertha Gordon is head nurse in the pediatric department, St. Mary's. Charlotte Hanson, Northwestern Hospital, Minneapolis, formerly county nurse in Dodge County, is now school nurse at Tower. A postgraduate course in surgical nursing is now offered at St. Mary's Hospital, commonly known as the Mayo Hospital. The course is of six months duration and is intended especially for nurses who desire to specialize in operating room work. Apply to Superintendent, St. Mary's Training School for Nurses, Rochester, Minnesota. Winona.—THE WINONA GENERAL HOSPITAL held graduating exercises for a class of six on April 4, at St. Paul's Parish House. The address was given by Dr. Pritchard; the diplomas were presented by C. M. Morse. A reception followed the exercises.

Missouri: A bill repealing the law regulating nursing in Missouri was signed by Governor Hyde on March 26, placing in its stead a law which reduces the educational requirements and does away with the mandatory features of the law and the educational director for schools of nursing. The Educational Director of the Board of Nurse Examiners has sent a letter to presidents of Boards of Trustees of all hospitals maintaining schools of nursing, to chairmen of Training School

Committees and to the presidents of each of the Federated Women's Clubs in Missouri, asking that a copy of the report, Nursing and Nursing Education, be procured and given careful study. The bulletin of the Public Health Division of the National Federation of Women's Clubs recommends that the Federation study the problems of schools of nursing in the interest of public health nursing.

St. Louis.—THE ST. LOUIS LEAGUE OF NURSING EDUCATION met on March 21 at St. Luke's Hospital. It was decided that the major programme for this year would be the study of the report, Nursing and Nursing Education. During the last year the League has reviewed various of the new textbooks for nurses and articles from the *American Journal of Nursing*; has with the coöperation of the Third District Association had a course of eight lectures in Psychology by Professor Mayo of Harris Teachers College; had a lecture on Social Hygiene by Dr. Yarros of Hull House; a lecture on Project Method of Teaching by the Principal of one of the local schools; has spent three sessions in discussion of the Report of the National Committee on Grading of Schools of Nursing; and has conducted an institute for instructors. A meeting of the Public Health Unit of the Third District Association was held on April 5. Alma Wretling gave an interesting talk on Rural Public Health Nursing in this state. Three years ago there were but three Public Health Nurses in Missouri outside of the cities; today there are fifty-five Public Health nurses in rural Missouri, and a demand for at least eight more. **St. Luke's ALUMNAE ASSOCIATION** held a meeting at the Nurses' Home on March 19. Chairman of committees appointed by the president, Mrs. Sharpe, are: Programme, Florence Rowland; Social, Valerie Burns; Visiting, Mattie Hall; Printing, Roberta Hunt; Nominating, Louise Dierson. The date has not been set for the annual graduation exercises, but plans are being made to make that entire day, which will probably be in the latter part of May, a St. Luke's Reunion. Some of the important features will be the meeting of old friends and classmates at the Nurses' Home in the morning; the graduation exercises on the west lawn of the hospital grounds in the late afternoon; then to finish the day, the annual alumnae banquet and dance in honor

of the graduating class, in the evening. More definite information with correct date will be included in notices to be sent out later. It is hoped that many of the non-resident members will come, at least for the day, prepared to take part in the graduation exercises in uniform. The meeting was followed by a social hour. **St. Joseph.**—THE ENSWORTH HOSPITAL ALUMNAE ASSOCIATION held its annual meeting in January, electing the following officers: President, Lorena Hales; vice-president, Mrs. John J. Kast; secretary, Myrtle Porterfield; treasurer, Ella Felch; auditor, Vera Owen; directors, Nellie Fairfax, Bertha Haskins, Minnie Poland. Chairmen of committees are: Eligibility, Lucy Palmer; Programme, Myrtle Porterfield; Nominating, Olive Giles. The aim of the association for the year is to carry every graduate of the training school on its roll. **THE CITY FEDERATION OF St. JOSEPH** has provided a scholarship for Public Health Nursing. This will be used by one of the staff of the Visiting Nurse Association toward a summer course in Infant Welfare Work this year at University of Minnesota School of Nursing.

Montana: THE MONTANA STATE BOARD OF EXAMINERS FOR NURSES will hold its annual meeting at the State Capitol, Helena, June 28 to June 2. Frances Friedrichs, Secretary, Box 928, Helena. **Glasgow.**—THE FRANCES MAHON DEACONESS HOSPITAL held its commencement exercises April 27; one nurse graduated. **Sidney.**—THE TWELFTH DISTRICT NURSES' ASSOCIATION (eight members) has sent to the Nurses' Relief Fund, \$30.

Nebraska: THE NEBRASKA STATE BOARD OF NURSE EXAMINERS will hold its next regular examination in Omaha and Lincoln, May 15 to 17, inclusive. For information and applications, write the Department of Public Welfare, Room 400, State House, Lincoln, Nebraska. **Lincoln.**—Faith Collins, graduate of the Passavant Memorial Hospital, Chicago, is superintendent of nurses at the Lincoln Sanitarium.

New Jersey: THE NEW JERSEY STATE BOARD OF EXAMINERS OF NURSES will hold an examination for certificate of registered nurse on June 15, 1923, in the State House, Trenton. Applications must be filed with the Secretary-Treasurer at least fifteen days prior to date

of examination. For further information apply to 302 McFadden Building, Hackensack, N. J. Elizabeth J. Highbid, Secretary-Treasurer. The Board of Examiners upon written application together with such references and proof of identification as the Board may by rule prescribe may issue a certificate *without examination* to any person who shall have been registered *by examination* as a registered nurse under the law of any other State or by *waiver prior to April 1, 1914* the requirements of which for securing such registration were at the time of issuance thereof equivalent to the requirements prescribed by this Act. THE NEW JERSEY STATE NURSES' ASSOCIATION held its twenty-first annual meeting at Willard Hall, Passaic, April 6. All sessions were well attended. Honorable John McGuire, Mayor of Passaic, paid a glowing tribute to the nurses in his address of welcome, stating that they were the most useful, faithful and responsible citizens. Elizabeth J. Highbid, President of the Association, in her address of greeting, stated how happy she had been in her relation with the nurses of New Jersey, and how she had appreciated the cooperation of all her co-workers. In reviewing the work accomplished, she spoke with pride of the recent legislative work, dealing with the amendment of the Nurse Practice Act, which passed the legislature and was signed by the Governor without a single change in the original. The amendments to the Nurse Practice Act provide for an Inspector of Schools of Nursing, yearly licensing of all registered nurses in the State, and reciprocity with individual nurses, registered in other states prior to 1914, meeting the requirements of the State of New Jersey. Dr. Haven Emerson, in a stimulating address on Preventive Medicine, stated that it was the duty and function of the nurse to teach those with whom she came in contact, so well how to live, that her services would not again be required. He pointed out the weak points in our present scheme of educating nurses, in that no effort was made to teach self expression, so that they could give of their great wealth of health information for the benefit of others in simple and direct words. Dr. Emerson's entire address was a challenge to the nurse to so prepare herself as to be of the greatest possible service to mankind. The officers for the year are as follows: President,

Virginia Chetwood, Hackensack; vice-presidents, Annie Curry, Orange; Harriet Matthews, Princeton; secretary, Marie Louis, Plainfield; treasurer, Jennie Manly, Atlantic City; director, Elizabeth J. Highbid, Paterson. THE NEW JERSEY STATE LEAGUE FOR NURSING EDUCATION held a meeting on the evening of April 6, in Willard Hall, Passaic. Martha M. Russell, Secretary of the National League of Nursing Education gave a synopsis of the work accomplished by the League since its inception in 1903. She also discussed the plans now under discussion for the reorganization of the League. Miss Durstin, Superintendent of Nurses, Trenton State Hospital for Mental Patients, gave a splendid outline of the work done by the attendants, and how they were being prepared for their work. The subject of training attendants was discussed from every point of view, and plans are being formulated to train a subsidiary nurse in hospitals best adapted for her needs. PERTH AMBOY.—THE PERTH AMBOY CITY HOSPITAL held its commencement exercises April 12; four nurses graduated.

An Act to amend and supplement an act entitled "An act to regulate the practice of nursing in the state of New Jersey, to register nurses with the privilege of using the abbreviation 'R.N.' and to punish persons violating the provisions thereof," approved April first, one thousand nine hundred and twelve, as amended by act approved April fourteenth, one thousand nine hundred and fifteen, as amended by act approved April twentieth, one thousand nine hundred and twenty.

Be it enacted by the Senate and General Assembly of the State of New Jersey:

1. Within thirty days after the approval of this act the Governor shall, by and with the advice and consent of the Senate, appoint five persons, to be known as the State Board of Examiners of Nurses. Each member of said board shall be a resident of this State and a graduate of a [training school for nurses] school of nursing connected with an incorporated general or private hospital requiring not less than two years' training in the hospital with a systematic course of instruction in medical, surgical and obstetrical nursing and children's diseases, and shall have been engaged in nursing for not less than five years after graduation. One member of said board

first appointed shall hold office for one year, two for two years, and two for three years, or until their successors are appointed, and annually thereafter from the date of expiration of the term of office of an examiner, the Governor shall fill the vacancy for a term of three years with nurses possessing the above specified qualifications. Said appointees shall within thirty days after receipt of their commission, take, subscribe and file in the office of the Secretary of State, the oath or affirmation, prescribed by law. An unexpired term of an examiner caused by death, resignation or otherwise, shall be filled by the Governor in the same manner as an original appointment is made.

2. The board of examiners shall elect a president and secretary-treasurer from its members; and appoint an inspector of schools of nursing; it shall have a common seal; it shall make and adopt all necessary rules not inconsistent with the laws of this State or of the United States, whereby to perform the duties and transact the business required under the provisions of this act.

3. Said board shall hold meetings for the examination of applicants at the State House on the third Friday in June of each year, and at such other times and places as the board may deem expedient; *provided, however*, that the total number of such meetings during any one year shall not exceed three in all. Said board shall keep an official record of all its meetings and an official register of all applications for registration under the provisions of this act to determine the qualifications of the applicant to practice as a "registered nurse" in this State. Said register shall show name, age, nativity, last and permanent place of residence, and photograph of each applicant, the time he or she has spent in obtaining a competent grammar and high school education as hereinafter provided, and in study in [training schools for nurses] school or schools of nursing connected with hospitals, holding diploma thereof, and names and location of all such schools or examining boards which have granted said applicant any degree or certificate of registration of State examination; said register shall also show whether said applicant was examined, registered or rejected under this act and said register shall be prima facie evidence of all matters therein contained.

5. Notice of all meetings of the board for examination of applicants shall be given to the public press and to at least one journal devoted to the interests of the nursing profession and by mail to every applicant, and to every [training school] school of nursing in New Jersey at least thirty days prior to the meetings. Any person who shall by affidavit or otherwise show to the satisfaction of the board that he or she is at least twenty-one years of age, of good moral character, having a grammar school certificate and one year of an approved high school or their equivalent to be determined by the Department of Public Instruction, and is a graduate in good standing of a [training school for nurses] school of nursing which gives a course of not less than two years in a public or private general hospital having a [capacity and beds for daily treatment of twenty-five] daily average of fifty patients where medical, surgical and obstetrical cases and children are treated or its equivalent as determined by the board of examiners, or a student nurse possessing the above qualifications within three months of graduation, and having successfully passed the final examinations, or nurse graduates of hospitals having not less than twenty-five daily average of patients and possessing the above qualifications and who have supplemented such hospital experience by affiliation approved by the State Board of Examiners of Nurses shall be eligible for such examination upon the payment of a fee of ten dollars, references from one practicing physician or surgeon and one registered nurse, and photograph of applicant to be deposited upon the filing of the application for examination at least fifteen days prior to the date of examination. Said examination shall include such subjects as elementary anatomy, physiology, bacteriology, materia medica, dietetics, hygiene, medical, surgical and obstetrical nursing, children's diseases and contagion. If such applicant shall pass such examination with a general average of seventy per centum and at least sixty per centum in each subject, the board shall issue a certificate of registration to said applicant; *provided*, the said board may by unanimous vote withhold such certificate for one of the following reasons: dishonesty, gross incompetency, a habit rendering a nurse unsafe to be trusted with or unfit for the care of the

sick, previous conduct derogatory to the morals or standing of nursing. Applicants who fail to pass [any] an examination may be reexamined at any subsequent examination [without payment of an additional fee] within two years after a third reexamination an additional fee of ten dollars shall be paid.

Any person to whom a certificate of registration shall be issued shall, within sixty days thereafter and upon the payment of a fee of fifty cents, cause the same to be recorded with the county clerk of the county in which such person resided at the time of application. Such person shall be prepared whenever requested to exhibit such certificate of registration or a certified copy thereof. Any person who has received such certificate and caused the same to be recorded as aforesaid shall be entitled to append the letters "R.N." to his or her name until such time as said certificate may be revoked for cause, as hereinafter provided.

6. Any person who is at least twenty-one years of age, of good moral character and a resident of the State, applying for registration within two years of the passage of this act and who shall by affidavit or otherwise show to the satisfaction of the board that he or she is a graduate of a [training school for nurses] school of nursing which gives a course of not less than two years in a public or private general hospital where medical, surgical and obstetrical cases and children's diseases are treated, or that he or she was at the time of the passage of this act a student in such [training school for nurses] school of nursing, and afterward was graduated therefrom, shall be eligible for registration without examination, upon the payment of a fee of [five] ten dollars, the application to be accompanied by references and photograph of applicant.

7. The board of examiners, upon written application, together with such references and proof of identification as the board may by rule prescribe, may issue a certificate without examination to any person who shall have been registered by examination as a registered nurse under the law of any other State or by waiver prior to April first, one thousand nine hundred and fourteen the requirements of which for securing such registration were at the time of issuance thereof equivalent to the requirements prescribed by this act [and which gives

the same privilege to registered nurses of this State.]

8. All fees collected by said board of examiners shall be paid to the secretary-treasurer, and said secretary-treasurer shall pay from the moneys so received, upon the approval of the president, the salary of said secretary-treasurer and inspector of schools of nursing and necessary expenses of the members as provided in section four of this act, also for books, certificates, stationery, and other necessary expenses of the board, provided that said board shall not create nor incur expenses exceeding the sum received as fees under the provisions of this act. The secretary-treasurer shall, before taking office, give to the State a bond with surety, conditioned for the faithful performance of the duties of said office in the penal sum of not less than one hundred dollars, and shall keep an account of all moneys received and expended as aforesaid, and shall render a detailed statement thereof to the Comptroller on or before June first in each year. The secretary-treasurer shall also submit to the Governor on or before June first in each year a general statement of the work of the board, including therein a statement of the number of applicants received, approved and rejected during the year.

8. After January first, one thousand nine hundred and twenty-four and each succeeding year, the secretary of the State Board of Examiners of Nurses shall mail to every nurse registered in the State of New Jersey an application blank for registration, addressing the same in accordance with the post office address given at the last previous registration. Each registered nurse shall renew his or her certificate in accordance with the provisions of this paragraph and pay a renewal fee of one dollar. Every certificate which is not so renewed shall expire on the first day of May of each year. Applications for renewal of a certificate must be filed with the State Board of Examiners of Nurses during January and February of each year and shall be accompanied by a fee of one dollar upon the receipt of which a renewal card will be forwarded to the applicant. The Board of Examiners of Nurses shall publish each year a printed list of legally registered nurses within this State.

9. This act shall take effect immediately.

New Mexico: The President of the State

Association, Miss McMinimin, and the Secretary, Miss Rowe, have had to resign office because of absence from the state. Their successors are: Mrs. Blanche A. Montgomery and Mary Wight, both of Albuquerque.

New Hampshire: THE GRADUATE NURSES' ASSOCIATION OF NEW HAMPSHIRE held its quarterly meeting at the Amoskeag Women's Club, Manchester, March 14. A meeting of the Public Health Section was held in the morning,—reports of field work and a general discussion. The League of Nursing Education also held a meeting,—a general discussion of training school problems. Miss Cameron explained the new record system to be introduced in the schools the next school year. The general meeting was called at 2:30 p. m. Carrie M. Hall of Boston gave a most interesting talk upon the work and growth of nursing in the past fifty years. Three delegates were chosen to attend the New England Division meeting in Burlington, Vt., May 22-24. Dr. Bartlett of Manchester stated very clearly the stand taken by opponents of the Shepard-Towner bill, in New Hampshire, while Miss Crough spoke for the bill, telling of the work being done in the state. A social hour followed, the Amoskeag nurses being hostesses. **Concord.**—The annual meeting of the ALUMNAE ASSOCIATION OF THE NEW HAMPSHIRE STATE HOSPITAL was held on March 31. Officers elected are: President, Margaret A. Alexander; vice-presidents, Mary E. Farley, Mary A. Tucke; secretary, Olive E. Flanders; treasurer, Ethelyn D. Jenkins. A reunion of all former graduates will be held in June on the thirty-fifth anniversary of the graduation of the first class. A social hour followed the meeting.

New York: Buffalo.—DISTRICT 1 held its March meeting on the 21st at the Y. W. C. A. Building. After the business meeting, a half hour was devoted to round table discussion of practical topics, followed by an interesting talk on Mental Nursing by Dr. Kuhlman of the Buffalo State Hospital. THE BUFFALO GENERAL HOSPITAL ALUMNAE gave an indoor fete on April 5, at the Nurses' Home. THE ALUMNAE OF THE BUFFALO SISTERS OF CHARITY HOSPITAL gave a card party and dance on April 11 at the Iroquois Hotel. The graduates of the BUFFALO CITY HOSPITAL are forming an alumnae association. THE DEACONESS HOSPITAL holds its commencement ex-

ercises May 3rd; fifteen nurses will graduate. **Rochester.**—DISTRICT 2 held its March meeting at the Monroe County Tuberculosis Sanitarium on the 27th. Dr. Lloyd spoke on Diet in Tuberculosis. A pleasant social hour followed. THE GENESEE VALLEY NURSES' ASSOCIATION will hold an institute in Rochester, May 22-25, inclusive. Registration will open on the morning of May 22 at nine o'clock at Mechanics Institute. The New York State Department of Education will send out detailed programmes. It is planned to make the institute of the most practical value to all who attend and suggestions will be gladly received. The chairman of the committee on arrangements is Ivona E. Johnson, General Hospital, Rochester. **Syracuse.**—THE ALUMNAE ASSOCIATION OF THE HOSPITAL OF THE GOOD SHEPHERD met on March 29 at the Nurses' Home. A most excellent paper was given by Louise Sherwood, president of the District Association on Coöperation between Alumnae, and District Associations. Dr. Charles H. Young, Superintendent of the Presbyterian Hospital, New York, has resigned to become Superintendent of the Hospital of the Good Shepherd. Arvilla Everingham, superintendent of Auburn City Hospital, has resigned because of ill health. THE SYRACUSE MEMORIAL HOSPITAL held its commencement exercises in April; twelve nurses graduated. **Binghamton.**—BINGHAMTON CITY HOSPITAL held its commencement exercises in April; four nurses graduated. **Ogdensburg.**—DISTRICT 6 held its regular meeting April 4, at the A. Barton Hepburn Hospital. There were 36 members in attendance. A social hour followed the business meeting with the A. Barton Hepburn Alumnae as hostesses. **Utica.**—DISTRICT 7 held its regular meeting at St. Elizabeth's Hospital, March 8. There were about 75 nurses present from Rome, Little Falls, and Utica. Mrs. Lena Clark, vice-president, presided. James P. Mulhall, District Manager, Metropolitan Life Insurance Company, gave a very interesting talk on Thrift. The Utica State Hospital Alumni Association was accepted into membership. St. Elizabeth's Hospital Alumnae Association acted as hostesses, and a very pleasant social hour was enjoyed. **Albany.**—THE CAPITOL DISTRICT No. 9 held its annual meeting at the Nurses' Home, Albany Hospital, April 5. It was decided to

have an annual dinner at the Ten Eyck Hotel the first week of May. Julia A. Littlefield was made chairman of the committee. The following officers were elected for the year: President, Mrs. Kathryn M. Lamb, Albany; vice-presidents, Laura Noonan, Saratoga, and Anna L. Aline, Albany; secretary, Florence Freeman, 210 Eighth Avenue, Watervliet; treasurer, Catherine Corcoran, North Troy; directors, Mary R. Donald, Albany, and Amy M. Hilliard, Troy. The nurses visited the State Laboratory where Dr. Lawrence Early gave a very interesting talk on "How the work is carried on in each department." Refreshments were served by The Albany Hospital Nurses' Alumnae Association. **Troy.**—THE TROY HOSPITAL ALUMNAE ASSOCIATION held a meeting at the Troy Hospital, March 5. The promise of a rousing meeting was agreeably fulfilled. The routine business of the meeting was carried through with despatch in order to enable those assembled to enjoy a lecture entitled "Water" by the Rt. Rev. Mgr. J. T. Slatery, who is expert in hydrotherapy, the most delightful feature of the evening. A social hour followed. **Yonkers.**—THE COCHRAN TRAINING SCHOOL OF ST. JOHN'S RIVERSIDE HOSPITAL held its twenty-seventh annual commencement on April 5. Charles Phelps Easton, President of the Hospital, presided and presented diplomas to six graduates. The class was especially fortunate in having Elizabeth C. Burgess to deliver the address. **New Rochelle.**—THE NEW ROCHELLE HOSPITAL held commencement exercises in April; one nurse graduated. **New York.**—THE NEW YORK COUNTIES ASSOCIATION, (District 13), at its recent annual meeting elected as officers: President, Beatrice Bamber; recording secretary, Ella A. Lawrence; corresponding secretary, Annie McDougall; treasurer, Emily H. Kerr. THE ALUMNAE ASSOCIATION OF THE NEW YORK HOSPITAL celebrated the twenty-fifth anniversary of the New York Hospital Graduate Nurses' Club by holding a reception at the Club House on the evening of March 15. The guests were received by Miss Gillette, Superintendent of the Club, Miss Anderson, President of the Alumnae Association, and Miss Jordan, Superintendent of the Training School. Ann Hutton read a history of the Club. Gifts to the Club in honor of the

occasion were an oak table, bench and lamps for the library; a clock with chimas from Dr. and Mrs. Busby; flowers from many friends and the invitations from the printer. Dancing followed the reception. Five of the charter members of the Club were present. At the annual meeting of the Alumnae Association in January, the following officers were elected: President, Lydia Anderson; vice-president, Mary A. Smith; recording secretary, Ethel B. Goode; corresponding secretary, Ethel Fennemore; treasurer, Sarah E. Moore; trustees, Abbie Robinson, Clara Greene. THE HOSPITAL FOR RUPTURED AND CRIPPLED held a reception on March 15, when the guests were invited to inspect the new pavilion for private patients. BELLEVUE HOSPITAL is planning a meeting at Carnegie Hall on May 8 in honor of the fiftieth anniversary of its School for Nurses. A class of 57 was graduated on May 1. At the MOUNT SINAI commencement, noted in the April *Journal*, addresses were given by Dr. Haven Emerson and Annie W. Goodrich. Grace E. Hutchinson was awarded a Teachers College scholarship for studious habits, special aptitude and fitness for nursing work, and for advancement of the profession of nursing. Barbara Friedlein was awarded a scholarship based on the "best record of kindness and proficiency in actual bedside nursing"; scholarships for exceptional ability in nursing and class work were awarded Ruth S. Emborn, Ruth Noe, Benie R. Fox, Roberta E. Lytle, Elizabeth C. Keogh, and Bertha A. Bernand. For similar reasons three members each, of the classes of '24 and '25 were awarded scholarships. The announcement was made that the school name has been changed from Training School for Nurses to School for Nurses. ELLA PHILLIPS CHANDALL has been appointed Assistant General Director of the American Child Health Association. THE LENOX HILL ALUMNAE ASSOCIATION at its March meeting had an interesting address on National Headquarters by Agnes G. Deane, secretary of the American Nurses' Association. The second annual spring dance for the benefit of the Pension Fund was given at the Hotel St. Regis, April 21. Members of the class of 1925 were guests. Pauline Duella, class of 1915, is director of the Social Service Department of the Stamford Hospital, Stamford,

Conn. The student nurses held a rummage sale recently which brought \$30 for the reference library. ST. LUKE'S HOSPITAL held commencement exercises in the chapel on April 18 for a class of forty-one. THE FRENCH HOSPITAL held commencement exercises April 11; eleven nurses graduated. THE ROOSEVELT HOSPITAL held commencement exercises on April 18; forty-two nurses graduated. ST. MARY'S FREE HOSPITAL FOR CHILDREN held its commencement exercises in April and nine nurses graduated. Brooklyn.—THE BROOKLYN HOSPITAL TRAINING SCHOOL at its April meeting presented its treasurer, Miss Holt, a purse containing \$200 in gold, with an address expressing appreciation of her faithful and gratuitous services for twenty-five years and the realization that it is due to her prompt and painstaking attention to details that the Association is in so good a financial condition. Miss Holt was assured that the gift expressed in but small measure, the love and gratitude of her associates. THE SWEDISH HOSPITAL held commencement exercises in April; three nurses graduated. JULIA A. DUFFY has resigned her position as Principal of the Training School of the Central Islip State Hospital to accept a similar one at St. Vincent's Retreat, Harrison.

North Carolina: THE BOARD OF NURSE EXAMINERS will meet in Raleigh, May 24-26. THE STATE NURSES' ASSOCIATION will hold its annual meeting the week following, May 29-31, in the parish house of Christ Church. The State meeting will be followed by a Public Health Institute, under the auspices of the State Board of Health. Asheville, District No. 1.—At the monthly meeting in March, a large number were present and much enthusiasm was shown in the various subjects discussed. Miss Laxton, Superintendent of Biltmore Hospital, told of meeting with a legislative committee in Raleigh, when an amendment to the nurse practice bill was killed. This was an effort to take the governing power of the State Board of Examiners out of the nurses' hands. May Stockton, the newly appointed Buncombe County nurse, was presented and explained the various sources of revenues contributing to her support which includes Federal, State, County, and Red Cross aid. A plea was made by

Miss Batterham for more subscribers, for the *Journal*, which contains so much that is valuable to the profession. Miss Sherwood, the President, was hostess at a delightful tea, which was served by the Club house committee. On March 22, a reception was given in honor of Dr. Richard O. Beard, of the University of Minnesota. Both doctors and nurses enjoyed Dr. Beard's address on University Affiliation for Nurses.

Ohio: THE NURSES' EXAMINING COMMITTEE OF THE OHIO STATE MEDICAL BOARD will hold an examination for applicants for nurse registration on June 12, 13 and 14, Columbus, Ohio. Applications should be made well in advance to Nurses' Examining Committee, Ohio Building, Fourth and Main Streets, Columbus. THE OHIO STATE ASSOCIATION OF GRADUATE NURSES will hold its twentieth annual meeting, and the OHIO STATE LEAGUE OF NURSING EDUCATION, its tenth annual meeting, at the Portage Hotel, Akron, Ohio, May 2-4. On May 2 at 2 p. m., the State Association trustees will meet; at 4, those of the League; at 8, the Advisory Council (all District and Alumnae presidents). On May 3, the opening session will have addresses and reports. In the afternoon, the Private Duty Section will meet; an automobile ride will be enjoyed, and in the evening, the Public Health Section will have charge of the programme, with Elizabeth G. Fox as outside speaker. The morning of May 4 will be given to the League. At 11, the Public Health Section and the Private Duty Section will hold conferences. Friday afternoon will be given to business meetings. In the evening there will be a banquet. THE FLORENCE NIGHTINGALE FOUNDATION. In 1920, the State Association published a pamphlet containing a biographical sketch of Miss Nightingale and calling attention to the need of endowment for schools of nursing. The attempt to make a Foundation for nursing in Ohio in the name of Florence Nightingale through the distribution of this pamphlet, and the request for a small subscription from those who read it was therefore primarily an attempt to reach the general public with the message that they should interest themselves in their own local hospital schools and that they should help spread the idea that schools of nursing must share with other schools the benefit of direct

gifts if they were to develop along sound educational lines. The secondary purposes of the distribution of the pamphlet were the accumulation of a modest Foundation to be used as a Loan Scholarship Fund in Ohio and also to afford an illustration of the value of a direct alliance between the giving public and schools of nursing. The campaign for the Foundation is to be closed May 3, the date of the State Convention. Information concerning this Foundation may be obtained from Claribel A. Wheeler, Mt. Sinai Hospital, who is the State Chairman. Pamphlets at 10 cents per copy can be secured from Frances B. Latimer, State Treasurer, Cleveland Nursing Center, 2157 Euclid Avenue, Cleveland; all funds are to be sent directly to her. ELEANOR JONES FENN, Head of Public Health Nursing Education, State Department of Health, spoke on Nursing, in Dayton, on April 13, to four groups of Junior and high school girls. Cleveland.—THE SECTION OF NURSING EDUCATION OF DISTRICT 4 at its April meeting had the subject Administration in Schools of Nursing presented by Claribel A. Wheeler. THE CLEVELAND NURSING CENTER reports 576 lectures, meetings or social gatherings, by 36 different associations during the year 1922. The Hospitality Committee of the Guild of St. Barnabas served tea officially to 1400 guests during the year. Toledo.—THE TOLEDO HOSPITAL ALUMNAE ASSOCIATION held its annual meeting recently and elected the following officers: President, Lenty M. Neville; vice-president, Jennie Jordan; secretary, Esther Wonderly; corresponding secretary, Doris Whiteman; treasurer, Frances Thompson; trustees, Sophia Voss, Ethel Lickly, Elizabeth Townsend; chairmen of Committees are: Membership, Mrs. Edgar McDermott; Programme and Entertainment, Carrie Sell; Sick and Flower, D. Whiteman. A Valentine Dance given in February at the Woman's Building, brought \$325 for the endowed bed fund.

Oklahoma: THE OKLAHOMA STATE BOARD OF NURSE EXAMINERS will conduct an examination for applicants for registration at the State Capitol in Oklahoma City on the 31st of May and June first. Applications should be filed with the secretary thirty days prior to the date of examination. Olive Salmon, Secretary, 206 Triangle Building, Pawhuska.

Oregon: THE OREGON STATE GRADUATE

NURSES' ASSOCIATION announces the opening of the State Graduate Nurses' Headquarters and Official Registry at 673 Johnson Street, Portland. Graduate nurses are invited to make this office their professional headquarters and information bureau. The Official Registry will serve especially the First District Nurses' Association of Oregon, but service will not be limited to the First District area. The opening of the State Headquarters and Official Registry marks an important milestone in the activities of the State Association. For three years there has been an appreciation of the need of such an office and its achievement is a tribute to the loyalty and coöperation of Schools for Nurses, Alumnae Associations and nurse members working individually and in groups toward this end. Mrs. Frances McLane Platts, R.N., was unanimously chosen as Director and Registrar with Emily Booth, R.N., as her assistant. Both of these women are well known and beloved throughout the State and possess qualities which make for success in the new venture. Eugene.—MERCY HOSPITAL held commencement exercises April 30; six nurses graduated.

Pennsylvania: Philadelphia. — THE ALUMNAE ASSOCIATION OF THE MOUNT SINAI HOSPITAL TRAINING SCHOOL held a regular meeting on March 29, at the home of Mrs. Marcus Berman (Jeanette Cooper). From the Theater Benefit given in February, quite a nice sum was realized, the proceeds to go towards the Endowment Fund. After the routine business was disposed of, Mrs. Berman served a delicious luncheon. Greensburg.—Mrs. M. D. Burke, Superintendent of the Westmoreland Hospital has resigned, to become superintendent of the Glens Falls Hospital, Glens Falls, N. Y., on May 15. Her departure is much regretted. During her administration, a nurses' home has been erected, and an annex to the hospital is under contemplation. Harrisburg.—Edith Abary has recently been appointed to take charge of the department of anaesthesia at the HARRISBURG HOSPITAL. Miss Abary took a course in anaesthesia at Grace Hospital, Detroit. Phoenixville.—THE PHOENIXVILLE HOSPITAL held its commencement exercises April 6; six nurses graduated. Pittsburgh.—THE MONTFLORE HOSPITAL NURSES' ALUMNAE ASSOCIATION gave a very successful benefit dance at

the Hotel Schenley on February 6. The proceeds will be used for charitable and worthy causes such as establishing a fund for sick nurses, the Hospital building fund, etc.

Rhode Island: Newport.—THE ALUMNAE ASSOCIATION of the Newport Hospital School for Nurses held a regular meeting on April 3. Mary K. Nelson spoke to alumnae members, nurses from the Naval Hospital, and Senior student nurses on Phases of the Red Cross Nursing Service. A social hour followed.

South Dakota: THE SOUTH DAKOTA STATE NURSES' EXAMINING BOARD will hold an examination for registration of nurses at Pierre, Capitol Building, on June 6 and 7, 1923. Applications must be filed with the Secretary, Mrs. Elizabeth Dryborough, Rapid City, at least two weeks in advance of the examination. THE SOUTH DAKOTA STATE ASSOCIATION OF GRADUATE NURSES will hold its annual meeting on June 11, 12 and 13, at Madison. Marie T. Phelan, Field Nurse for the United States Children's Bureau, will conduct an institute on Maternity and Infant Nursing during the three days following the meeting of the State Nurses' Association. The course will be preceded by a discussion of the local state plans. **Rapid City.**—REGISTERED NURSES' ASSOCIATION, DISTRICT No. 1, will hold its annual meeting on May 7, in the Public Library Club Room.

Tennessee: Memphis.—THE PRIVATE DUTY SECTION OF THE DISTRICT held a meeting on March 1, and elected officers: Chairman, Lulu C. Robley; vice-chairman, Margaret McFerrin; secretary, Madge M. Irby; treasurer, Annie M. Colquitt; directors, Birdie W. Driggers, Jennie Lee Blumingsberg; registrar, Nellie C. Smith; assistant registrar, Kate M. Scanlon.

TEXAS: THE TEXAS STATE NURSES' ASSOCIATION will hold its annual meeting at Waco, May 15-17. The State League of Nursing Education and the Public Health Nurses' Organization will meet at the same time. THE AMENDED BILL FOR STATE REGISTRATION passed both houses of the legislature and was signed by Governor Neff on April 4. The text follows.

An Act to define and regulate the practice of professional nursing; to create a board of nurse examiners for the examination of licens-

ing of nurses, and to prescribe their qualifications; to provide for their proper registration and for the revocation of certificates and to fix suitable penalty for the violation of this Act, to repeal all laws and parts of laws in conflict herewith, and declaring an emergency.

Be it enacted by the Legislature of the State of Texas:

Section 1. That a board to be known as the Board of Nurse Examiners for the State of Texas is hereby established. Said board shall be composed of five registered graduate nurses, of at least twenty-five years of age, of good moral character and graduate from a school of nursing connected with a general hospital or sanitarium of good standing, presided over by a graduate registered nurse, where a two or more years training with a systematic course of instruction is given. All members of said board must be nurses who have had at least three years' experience in educational work among nurses. Said board shall be appointed by the Governor within sixty days after this bill goes into effect, and the term of office shall be two for three years, and three for two years, or until their successors shall be appointed and qualified. Vacancies occurring in the board shall be filled in the same manner as the original appointments were made.

Sec. 2. That the members of the said Board shall, as soon as organized, elect from their number a president and secretary, who shall also act as treasurer. Three members of this Board shall constitute a quorum. Special meetings of said board shall be called by the president and secretary upon the written request of any two members. The board shall have authority to make such by-laws and rules as may be necessary to govern its proceedings and to carry into effect the purpose of this Act. The secretary shall be required to keep a record of all the meetings of said board, including a register of all the names of all nurses registered under this Act, which shall at all times be open for public inspection; and said board shall assist the proper legal authorities in the prosecution of all persons violating any of the provisions of this Act, and to this end shall furnish to the district and county attorneys of the various counties such information as it may have in

its possession; that the president and secretary shall make a biennial report to the Governor on or before the first day of January, immediately preceding the convening of the Legislature together with a statement of the receipts and disbursements of said board.

Sec. 3. The Board of Nurse Examiners shall appoint an educational secretary, who shall be at least thirty years old, and shall have had at least five years' experience in educational work among nurses; the salary of which educational secretary shall be fixed and paid by the Board of Nurse Examiners out of such money as may come into its hands as hereafter provided. The duties of said educational secretary shall be to visit all schools of nursing in the State at least once a year to confer with superintendents of hospitals and superintendents of nursing schools as to the system of instruction given and as to accommodations and rules governing said school in reference to its students. The Board of Nurse Examiners shall prescribe such methods and rules of visiting, and such method of reporting by the said educational secretary as may in its sound judgment be deemed best and proper.

Sec. 4. The secretary-treasurer of the Board of Nurse Examiners shall, within thirty days of her election by the Board execute a bond in the penal sum of \$1,000.00, payable to the Governor of the State of Texas and to his successor or successors in office, conditioned that she shall faithfully perform the duties of her office, and account for all funds coming into her hands as secretary-treasurer; said bond to be signed by two or more good and sufficient sureties or by a surety company authorized to do business in this State, to be approved by the president of said Board. The salary of the secretary shall be fixed by the Board and shall be exclusive of such traveling and other expenses as may be incurred with the approval of the board in the discharge of the official duties of said secretary. The salary of the secretary shall be paid by the board out of the receipts of said board as hereinafter provided.

Sec. 5. The said Board of Nurse Examiners and the educational secretary shall make and subscribe to the oath of office required of other executive officers of the State, which oath may be sworn to and signed before a

notary public or other officer authorized by law to administer oaths; and when so sworn to, shall, within thirty days after appointment, be filed with the secretary of the State of Texas.

Sec. 6. The members of said board shall receive such per diem as may be fixed by the board not to exceed ten dollars per day for each day they are actually engaged in the work of the Board, and, the Board may defray all necessary traveling and other expenses incurred by its members in attending meetings. The board shall pay such per diem and expense as is provided for in this section out of the money received by it under the provision of this Act.

Sec. 7. Applicants for registration under the provisions of this Act must have had two years continuous training under a registered nurse in a school of nursing from which she graduates. Said school of nursing must be an accredited school approved by the Board of Nurse Examiners whose course shall cover two or more years. Said school of nursing, if located in Texas, must be provided over by a nurse registered in Texas. Applicants who have had two years' training in a nursing school connected with a special hospital, may be accepted for registration, provided, he or she shall have had additional training in an accredited school of nursing connected with a general hospital of at least one year.

Sec. 8. Upon filing application for examination, each applicant shall pay an examination fee of fifteen dollars, which shall in no case be returned to an accepted applicant, whether the examination be successfully passed or not; but in case the applicant passes the examination then no further fee shall be required for registration. Any applicant for registration who shall fail to pass the examination herein provided for shall have the right after six months and within a year to stand a second examination on those subjects wherein he or she has failed to make a grade of 70%, without payment of any additional fee. However, if more than three examinations are necessary, an additional fee of two dollars will be charged for each. The examination shall be of such character as to determine the fitness of the applicant to practice professional nursing as contemplated by this Act, provided said board shall prepare questions for

examination and shall examine applicants on all subjects which said board shall deem necessary. A grade of not less than seventy on any one subject shall be required to pass the examination. If the result of the examination shall be satisfactory to the board a certificate shall be issued by said board signed by the president and secretary and attested by the seal thereof. Upon the receipt of said certificate, the person named therein shall be duly qualified and authorized to practice professional nursing in this state.

Sec. 9. All nurses who are engaged in professional nursing at the time of the passage of this Act and who shall have qualified under any previous law of this State and shall have received a certificate from the board under any such previous law regulating professional nursing shall not be required to stand any further examination under this law, but shall register with the county clerk in the county where she then resides.

Sec. 10. Any applicant of good character, who holds a registration certificate from another state or territory, whose requirements are equal to those of Texas and whose individual qualifications shall be equivalent to those required in this Act, may in the sound judgment of the board, be granted a license to practice nursing in this State, provided a fee of fifteen dollars is paid to the board.

Sec. 11. A nurse who has received his or her license or permit according to the provisions of this Act shall be styled a "registered nurse." No other person shall assume such title or use the abbreviation "R.N." or any others to indicate that he or she is a graduate, certified nurse.

Sec. 12. All other graduated nurses from accredited schools of nursing who are actually engaged in the pursuit of their profession can practice under a permit issued by the Board of Nurse Examiners for a fee of two dollars shall be paid. Such permit shall be issued only until such time as applicants can qualify for registration.

Sec. 13. Upon receiving a certificate of registration the person to whom it is issued shall within thirty days thereafter have same registered with the county clerk in the county where such person resides, in a book kept for that purpose, together with a certificate of his or her identity, as the person to whom

same was issued, and his or her place of residence at the time of examination and registration. Any person practicing professional nursing as contemplated in this Act shall be prepared whenever requested to show his or her certificate of registration from the Board of Nurse Examiners, and from the county clerk of the county in which he or she registered. The county clerk shall be entitled to a fee of fifty cents for each certificate registered and shall furnish annually on the first day of January of each year to the State Board of Examiners, upon blanks supplied by said board, a duplicate list of all certificates registered by said clerk during the year; and shall include therein the date when said certificate was registered and the name and residence of the person registering the same, for which he shall receive from said board a fee of two and one-half dollars.

Sec. 14. The State Board of Nurse Examiners may make complaint in a court of competent jurisdiction by a unanimous vote of said board for gross incompetence, malpractice, dishonesty, intemperance, or any act derogatory to the morals and standing of the profession of nursing, which may be determined by the board, provided, however, before any certificate shall be revoked, the holder thereof shall be entitled to at least thirty days notice in writing of the charge against him or her, as the case may be, and of the time and place of hearing on such charges, at which time and place he or she shall be entitled to be heard, and shall have the right to introduce evidence in their own behalf; to examine and cross-examine all witnesses, and in the event the court shall, upon such hearing, decree a revocation of the certificate of such nurse, he or she shall have the right to appeal.

And provided further, that such certificate shall upon such appeal, remain in full force and effect until such appeal shall be disposed of by such district court, whose decision in such questions shall be final.

Upon the revocation of any certificate by such board, if no appeal is taken therefrom, or upon the revocation of such certificate by such court, it shall be the duty of the Secretary of such board to strike the name of the holder of such certificate from the roll of registered nurses kept by such board.

Sec. 15. On or before the first day of March of each year the secretary of the Board of Examiners shall mail to each nurse registered in the State of Texas a blank application for re-registration, addressing the same to the postoffice address as shown by the records of said board. Upon receipt of such application blank, which shall contain space for such information as the board shall deem necessary, he or she shall sign and swear to the accuracy of the same before a notary public or other officer authorized to administer oaths, after which he or she shall forward such sworn statements and application for renewal of his or her registration certificate to the secretary of the board, together with a fee of fifty cents. Upon receipt of such application and fee and having verified the accuracy of the same by comparison with the applicant's initial registration statements, the secretary of the board shall issue a certificate of registration which shall render the holder thereof a legally qualified registered nurse for the ensuing year. These certificates of re-registration shall bear the date of April of the year of issue, and shall expire on the last day of March in the year following. On the first day of July of each year or within thirty days thereafter, the secretary of the board shall publish and mail to each nurse registered in the State of Texas a printed list of the legally registered nurses in the State. Should any registered nurse continue to practice nursing and caring for the sick beyond the time for which he or she is registered and despite the facts that his or her name does not appear in the register, he or she shall be deemed to be an illegal practitioner and his or her license may be suspended or revoked by the board. All nurses already registered in this State, at the time of the passage of this Act, shall make application to the secretary of the board for a re-registration blank, upon receipt of which he or she shall, in the manner hereinbefore prescribed, make application for re-registration, forwarding to the secretary of the board the re-registration blank properly filled in, and accompanied by a fee of fifty cents. Said application and fee must reach the secretary on or before the first day of July following the adoption of this Act; failing which the delinquent may be dealt with as outlined in Section 14 hereof

regarding the suspension or revocation of license.

Sec. 16. All fees received by the State Board of Nurse Examiners under this Act shall be paid to the treasurer of the board who shall pay the same out only on vouchers issued and signed by the president and secretary of said board. All money so received and placed in said fund may be used by said board in defraying its expenses in carrying out the provisions of this Act.

Sec. 17. This Act shall not be construed to affect or apply to the gratuitous nursing of the sick by friends or mothers or other members of the family, or any person nursing the sick for hire who does not in any way assume or profess to practice as a graduate, certified, registered nurse.

Sec. 18. It shall be unlawful hereafter for any person to practice nursing as or claiming to be a graduate, certified registered nurse without a license or permit, from the State Board of Nurse Examiners, which license or permit shall have been registered with the county clerk of the county in which he or she resides within a period of thirty days.

Sec. 19. Any person violating the provisions of this Act or who shall make any false representations to said board in applying for a license shall be guilty of a misdemeanor, and upon conviction thereof shall be punished by a fine of not less than twenty-five (\$25.00) dollars nor more than two hundred and fifty (\$250.00) dollars.

Sec. 20. All laws and parts of laws in conflict herewith are hereby repealed.

Sec. 21. The fact that there is no adequate law defining and regulating the practice of professional nursing and providing for a properly qualified board of examiners for the examination and licensing of professional nurses, and prescribing their qualifications, create an emergency and an imperative public necessity exists that the constitutional rule requiring bills to be read on three several days, be suspended, and that this Act take effect and be in force from and after its passage, and it is so enacted. Fort Worth.—Mollie Hines, vice president of the State Association, who was seriously injured early in January when she was hit by an automobile, is now able to be about on crutches. Galveston.—Marie Kyberg and Mattie Peters

(College of Nursing, University of Texas) are taking a postgraduate course at the Herman Kiefer Hospital, Detroit. **Carlsbad.**—Mrs. Grace Engblad (College of Nursing, University of Texas), formerly superintendent of nurses State Tuberculosis Sanitarium, has accepted a position in Pueblo, Colorado, to do follow-up nursing for the Veterans' Bureau.

Vermont: THE VERMONT STATE NURSES' ASSOCIATION will hold its annual meeting on May 25 at Burlington. This meeting will follow those of the New England Division.

Virginia: THE VIRGINIA STATE NURSES' ASSOCIATION will hold its annual meeting in the Jefferson Hotel, Richmond, May 23-25. **Richmond.**—GRACE HOSPITAL holds commencement exercises May 3; eight nurses graduate. THE JOHNSTON WILLIS SANATORIUM held commencement exercises in April; twelve nurses graduated. ST. LUKE'S HOSPITAL holds commencement exercises May 2; fourteen nurses graduate. **Rossmore.**—THE LEWIS-GALE HOSPITAL will hold commencement exercises May 3; seven nurses graduate. **Hampton.**—THE HAMPTON TRAINING SCHOOL FOR NURSES held commencement exercises in April; eight nurses graduated.

Washington: Tacoma.—Anna T. Phillips, who has long been a resident of this city and who has been active in nursing affairs has gone to West Grove, Pennsylvania, to live.

Wisconsin: Janesville.—SECOND DISTRICT—The second meeting of the District was held at Mercy Hospital, March 3, and was well attended, nurses being present from Monroe, Jefferson, Egerton, Beloit and Madison. Adda Eldredge gave a very interesting address on the American Nurses' Association and the Nurses' Relief Fund. Leona Ludwig spoke of her work in Social Service. The next meeting will be held in Elkhorn, May 5. **Milwaukee.**—The February number of the *Crusader*, of the Wisconsin Anti-Tuberculosis Association is dedicated to the memory of Theta C. Mead and Edna Witen with the hope that the readers will see in this token of respect some slight recognition of the debt Wisconsin owes them. Besides dwelling on the lives of these unusual women, a complete history is given of the Public Health work of the state. The number is appropriately illustrated with photographs of public health nurses and classes. **FOURTH AND**

FIFTH DISTRICTS.—The regular meeting was held at the new home of the Wisconsin Nurses' Club, March 3. Dr. C. H. Beale, pastor of the Grand Avenue Congregational Church, spoke on the Value of Religion in the Life of the Nurse. At the close of the address, at the request of the President, Dalphine Hines, Dr. Beale offered prayer asking for a blessing upon the association and the new nurses' club. During the business meeting a letter was read from the Committee of the Jane Delano Memorial Fund asking for contributions. The hat was passed and nearly \$40 was collected and more promised. Cornelia van Kooy told the members of the four bills being introduced in the present legislature to repeal the county nurses' law, and asked the members to send in their protests. Refreshments were in charge of the Milwaukee County Nurses' Alumnae. The Private Duty Section of the District held its regular meeting April 3, at the Wisconsin Nurses' Club. Forty-five members were present. Alma Schlesinger spoke on The Theater Guild of New York. The officers of the section are putting forth an extra effort this spring to make the meetings interesting with a view to increasing the membership. Refreshments were served. The Wisconsin Nurses' Club gave a house warming on the night of the regular meeting, March 23. Cards and dancing were enjoyed and a tour of inspection of the new home at 267 Prospect Avenue. THE MILWAUKEE COUNTY HOSPITAL ALUMNAE held its regular meeting in the nurses' home, March 20. Helen W. Kelly spoke on Organization. The graduating class were the guests of the evening. THE COLUMBIA HOSPITAL ALUMNAE held a meeting on March 2. Amelia Ford, Professor of History of the Milwaukee Downer College, gave a talk on the recent discoveries in Egypt. Refreshments and a social time were enjoyed. **NINTH DISTRICT.**—The March meeting was held at the Outagamie Sanatorium. After the business meeting a song recital was given by Mrs. Robert McCoy. The district feels the loss by death of Mrs. John Dalton (Catherine Dorn), a bride of four months. Mrs. J. T. O'Connell (Elizabeth Walsh) will continue her work as community nurse of Kaukauna. THE FOURTH STATE CONFERENCE ON CHILD WELFARE AND PUBLIC HEALTH NURSING, an Institute on Maternal and Infant Hygiene, was

held March 19-23, at the State Capitol, Madison. Marie T. Phelan of the Children's Bureau assisted in the conference.

Wyoming: THE WYOMING STATE NURSES' ASSOCIATION will hold its annual meeting in Cheyenne, June 21 and 22.

BIRTHS

Birth, Marriage, and Death notices should be very plainly written, and dates should be given. Death notices of any date are published. Birth and Marriage notices are not published if more than four months past.

To Mrs. Albin Heidver (Elsie Angeson, class of 1914, Augustana Hospital, Chicago), a son, in January.

To Mrs. John Ligget (Ethel Andersen, class of 1915, Methodist Hospital, Des Moines, Iowa), a son, Donald Ross, February 18.

To Mrs. Charles Cottrell (Joyce Babcock, class of 1920, Bismarck Hospital, Bismarck, N. D.), a daughter, Phyllis Joyce, March 3.

To Mrs. Theodore Johnson (Ella Birke-land, class of 1912, Norwegian-American Hospital, Chicago), a daughter, in January.

To Mrs. Edgar Crouthamel (Gertrude Burmeister, class of 1909, Lankenau Hospital, Philadelphia), a daughter, Gertrude Mary, March 14.

To Mrs. Kyle B. Steele (Marjorie Costes, class of 1914, St. Luke's Hospital, New York), a son, Kyle Whitney, February 12.

To Mrs. Richard M. Sulzer (Caroline Coddington, class of 1916, New York Hospital), a daughter, March 1.

To Mrs. Claude Walls (Jane Craig, class of 1918, Altoona Hospital, Altoona, Pa.), a son, John Craig, March 26.

To Mrs. A. J. Damhorst (Helen Cromwell, class of 1921, Washington University Training School, St. Louis), a son, March 9.

To Mrs. Harry Taylor (Christine Deaver, class of 1921, All Saints' Hospital, Fort Worth, Texas), a son, January 29.

To Mrs. Gilchrist (Anna Eggert, class of 1911, Milwaukee County Hospital, Wauwatosa, Wis.), a daughter, in February.

To Mrs. Anna Pieman Evans (class of 1916, Lutheran Hospital, St. Louis), a son, March 30.

To Mrs. Mustell (Alleen M. Gates, Mercy Hospital, Chicago), a daughter, April 1.

To Mrs. W. W. Arrasmith (Rhea Hallman, class of 1921, Wesley Memorial Hospital, Chicago), a daughter, Ann, January 11.

To Mrs. Benjamin F. Hodges (Daisy Hillman, Massachusetts Homeopathic Hospital, Boston), a son, Benjamin F., Jr., March 5.

To Mrs. Peter J. Paulson (Hazel Hudson, class of 1921, Passaic General Hospital, Passaic, N. J.), a son, Peter Jared, Jr., February 10.

To Mrs. Carlton E. Wertz (Ethel Hurlbert, class of 1912, Buffalo Deaconess Hospital, Buffalo, N. Y.), a son, Carlton E., Jr., March 7.

To Mrs. Bert Seward Beldon (Fanita Hutchenson, class of 1912, Indianapolis City Hospital), a son, Bert Seward, Jr., March 16.

To Mrs. George Straith (Maud Jones, class of 1913, St. Luke's Hospital, New York), a son, Donald, March 2.

To Mrs. Vincent Byerlein (Blanche Kirsch, St. Mary's Hospital, Saginaw, Mich.), a son, Vincent Patrick, on March 15.

To Mrs. Alfred Hendrickson (Alma Kittlestvedt, class of 1919, Bismarck Hospital, Bismarck, N. D.), a daughter, January 22.

To Mrs. Peter Doland (Mary Lawrence, class of 1918, Passaic General Hospital, Passaic, N. J.), a son, Peter Henry, February 7.

To Mrs. William Scanlon (Clara Leedy, Mercy Hospital, Chicago), a son, March 5.

To Mrs. V. O. Hedens (Lucile Lucas, class of 1917, New York Hospital), a daughter, February 13.

To Mrs. Richard Olive (Mary McDonald, class of 1916, St. Lawrence State Hospital, Ogdensburg, N. Y.), a daughter, Mary Rita, in March.

To Mrs. Horace Doty (Mae Marceau, class of 1916, St. Mary's, Rochester, Minn.), a daughter, Harriet Elizabeth, in January.

To Mrs. F. L. Madden (Hazel W. Miller, class of 1916, St. Luke's Hospital, Chicago), a daughter, Nancy Ruth, February 18.

To Mrs. Gerald Griffith (E. Millette, class of 1917, New York Hospital), a daughter, March 1.

To Mrs. Paul Barnes (Sivona C. Moore, class of 1919, Chestnut Hill Hospital, Chestnut Hill, Pa.), a daughter, Jane, January 16.

To Mrs. A. G. Anderson (Lillian Peterson, class of 1913, Swedish Hospital, Minneapolis), a daughter, January 29.

To Mrs. E. P. Wright (Kari Sannerud, class of 1917, Norwegian-American Hospital, Chicago), a daughter, February 3.

To Mrs. John Van Der Slice (Ella Schaffer, class of 1910, Milwaukee County Hospital), a son, in February.

To Mrs. Jos. M. Rothschild (Cornelia Sipple, class of 1919, Halstead Hospital, Halstead, Kas.), a daughter, January 3.

To Mrs. Frank J. Potter (Nellie Taylor, class of 1921, New York Hospital), a daughter, January 30.

To Mrs. John Bodine (Elsether Uldine, class of 1909, Augustana Hospital, Chicago), a son, in January.

To Mrs. E. E. Ecker (Marie Van Peeth, Mercy Hospital, Chicago), a son, January 21.

To Mrs. R. E. Stahr (Florence Ward, class of 1913, Buffalo Deaconess Hospital, Buffalo, N. Y.), a son, David Miller, March 12.

To Mrs. Elmer Gramling (Lila White, class of 1920, Milwaukee County Hospital, Wauwatosa, Wis.), a daughter, February 11.

To Mrs. Wilber Scott (Vera Wright, class of 1909, University Hospital, Baltimore, Md.), a son, in January.

MARRIAGES

Edna Beal (class of 1917, New York Hospital, New York), to George Tyler, January 8. At home, Buffalo, N. Y.

Bertha C. Beek (class of 1910, St. Joseph's Hospital, Philadelphia), to John B. Erdrich, March 23. Miss Beek was Superintendent of Nurses at St. Joseph's Hospital for ten years. At home, Frankford, Pa.

Baby Brown (class of 1919, Johnson & Beal's Hospital, Fort Worth, Texas), to George Eagle, February 1. At home, Fort Worth.

Fletcher Copeland (class of 1918, Oglethorpe Sanatorium, Savannah, Ga.), to C. F. McNeil, March 3. At home, Asheville, N. C.

Myri Crockett (class of 1913, Toledo Hospital, Toledo, O.), to Walker Wheat, January 10. At home, Greenwood, Mo.

Estelle Mae Dougherty (class of 1922, Indianapolis City Hospital), to Charles H. Rivers, March 1. At home, Indianapolis.

Mae Duff (class of 1918, St. Mary's Hospital, Rochester, Minn.), to Frank Kestley, January 18. At home, Rochester, Minn.

Ethel Edman (class of 1921, Charleston Hospital, Charleston, Ill.), to Walter M. Richards, March 1. At home, Charleston.

Hannah Fuller (class of 1904, Christ Hos-

pital, Cincinnati, Ohio), to Raymond Hughes Hurbert, March 9. At home, Indianapolis.

Emma F. Guenther (class of 1912, Lutheran Hospital, Fort Wayne, Ind.), to Oscar F. Lankensau, January 31. At home, Decatur, Ill.

Nellie R. Hamill (class of 1907, Methodist Episcopal Hospital, Brooklyn, N. Y.), to Marshall A. Dyer, M.D., in February. At home, Syracuse, N. Y. Miss Hamill was for some years Superintendent of the Hospital of the Good Shepherd, Syracuse.

Gretta Latta (class of 1919, Methodist Hospital, Des Moines, Iowa), to William Hunter, February 14. At home, Des Moines.

Jean McGillivray (class of 1909, Evanston Hospital, Evanston, Ill.), to David Robertson, April 5. At home, West Toronto, Canada.

Elsie Makowski (class of 1922, Lutheran Hospital, St. Louis), to August Miller, March 31. At home, St. Louis, Mo.

Frenda Meyer (class of 1916, Lenox Hill Hospital, New York), to Clifford Vance Tinkham, March 15.

Tiffany Minnie (class of 1917, University Hospital, Baltimore, Md.), to Eben McLane, January 11. At home, Pittsburgh, Pa.

Mabel Nelson (class of 1920, Bethesda Hospital, St. Paul), to James Rother, March 21. At home, Butte, Montana.

Bertha O'Connor (Mercy Hospital, Chicago), to Robert O'Donnell, March 25. At home, Chicago.

Jennie Olson (class of 1918, Mounds Park Hospital, St. Paul), to Emil Henry Schneider, at Niagara, February 14.

Paula Ormsoth (class of 1921, Swedish Hospital, Minneapolis), to Harold E. Harbo, M.D., February 14. At home, Minneapolis.

Sylvia Patten (class of 1922, New York Hospital), to Kenneth Dayton, February 13.

Janet May Rogers (class of 1917, New York Hospital, New York), to Frederick Gourlie Cole, Jr., January 20.

Anne Hutton Ryder (class of 1918, Newport Hospital, Newport, R. I.), to Henry Fletcher, March 28. At home, Newport.

Leta K. Sherman (class of 1922, Methodist Deaconess Hospital, Sidney, Montana), to Peter Hanson, January 12. At home, Sidney.

Allice E. Stephen (class of 1915, Sonyes Training School, Sonyes, N. Y.), to James Greig, April 2. At home, Buffalo, N. Y.

Tassie Muriel Stevens (class of 1914, New York Hospital, New York), to Frederick Basnet Thomason, February 5. At home, Brooklyn, N. Y.

Helen Amanda Tallcott (class of 1918, New York Hospital, New York), to W. Vaughan Lewis, February 24. At home, Hastings-on-Hudson, N. Y.

Margaret Trevitt (class of 1918, Albany Hospital, Albany, N. Y.), to Donald Lens, April 9. At home, New York.

Elizabeth Walsh to J. T. O'Connell, February 5. At home, Kaukauna, Wis.

DEATHS

Lucy Bousman (University Hospital, Iowa City), recently.

Mary A. Brandt (class of 1911, Connecticut Training School, New Haven, Conn.), suddenly, April 8, at her home in Meridan, Conn. Miss Brandt was engaged in public health work at the time of her death.

Mabel Brigrann (graduate of St. Thomas Hospital, Nashville, Tenn.), on March 10. Burial was at Woodburn, Ky.

Adeline A. Brow (class of 1906, Newport Hospital, Newport, R. I.), on March 16, at the Newport Hospital, after months of intense suffering, leaving a void which time alone can fill. Miss Brown was a loved and valued member of the Alumnae.

Florence Buser (class of 1921, Lutheran Hospital, St. Louis), February 19, after a lingering illness.

Jennie Margaret Butters (Buffalo General Hospital, Buffalo, N. Y.), at her home in Hamilton, Ontario, in February. Miss Butters was formerly Assistant Superintendent of Prospect Hospital, Brooklyn.

Mrs. Freda Shaw Cameron (class of 1921, Toledo Hospital, Toledo, Ohio), in January, after a few weeks' illness. Mrs. Cameron did private duty nursing. Her loss will be an irreparable one.

Edith Esther Cherry (class of 1918, Garfield Memorial Hospital, Washington, D. C.), on February 16, in Tucson, Arizona.

Mary Agnes Cochran (St. Vincent's Hospital, Indianapolis), in San Francisco, California, on March 20. Miss Cochran was buried with military honors.

Betty Cooper (class of 1923, Washington

University Training School St. Louis), February 20, of influenza and pneumonia.

Elizabeth Costello (a student nurse at St. Anne's Hospital, Chicago), April 1, of pneumonia.

Florida L. Craft (City Hospital, Blackwell's Island, New York), on March 20, at Fort Leavenworth, Kansas. Miss Craft was well known in New York and Brooklyn. At one time she was registrar of the Nurses' Central Directory in New York. She had been suffering greatly for the past few years.

Agnes Clark Dart (class of 1898, Bishop Memorial Training School, Pittsfield, Mass.), in Winnipeg, February 13. Miss Dart was a nurse of exceptional ability. She practiced her profession for twenty-five years with technical skill, gentleness and devotion. She will be greatly missed by her patients and by her wide circle of friends.

Mrs. John E. Dalton (Catherine Dorn, class of 1912, Milwaukee County Hospital, Wauwatosa, Wis.), March 7, of erysipelas, at St. Vincent's Hospital, Green Bay. Mrs. Dalton's marriage was reported in the February *Journal*.

May E. Dyson (class of 1883, Rochester General Hospital, Rochester, N. Y.), on April 2, at the Hospital. Miss Dyson was the first graduate of her school. She had been actively engaged in private duty nursing for forty years, with the exception of a period of five months, during a former illness. Miss Dyson was attending a meeting of the District Association when taken ill.

Anna Belle Fisher (class of 1921, University of Michigan Hospital, Ann Arbor), on February 13, after a short illness with pneumonia. Miss Fisher faithfully performed her duties as a private duty nurse.

Isabella Gahan (class of 1894, St. Lawrence State Hospital, Ogdensburg, N. Y.), of pneumonia, at the Manhattan State Hospital, New York City, March 25.

Mrs. Bertha T. Glasgow (class of 1892, St. Joseph's Hospital, London, Ontario), on January 13, in Tucson, Arizona.

Mrs. Emil Steinfeldt (Mary Harney, class of 1907, St. Joseph's Hospital, Chicago), on January 26, at Maywood, Ill.

Julia Johnson (class of 1922, Methodist Hospital, Des Moines, Iowa), on February 24, of scarlet fever, after an illness of three days.

Miss Johnson had done private duty nursing, except for a short time spent at Bellevue Hospital. She was beloved by all who knew her and is mourned by many friends.

Mrs. Glen Spurgeon (Stella Jones, class of 1907, Seattle General Hospital, Seattle, Wash.), at the hospital, February 11, after an illness of two weeks. Mrs. Spurgeon had been a school nurse for some time.

Laura C. Linnell (class of 1920, Bethesda Hospital, St. Paul), on March 19, at Red Lodge, Montana. Miss Linnell was caught in a terrific gale and was hurled against a brick building, causing a fracture of the skull from which she died in ten minutes without regaining consciousness. Since graduation, Miss Linnell had done private nursing in St. Paul, Minn., and Billings, Mont., until March 5, when she went to Red Lodge. She was on night duty and was on her way to the hospital when the accident occurred. Funeral services were held in Billings and in St. Paul. Burial was at Center City, Minn. Miss Linnell was buried in her uniform; six members of her alumnae association, in uniform, acted as pall bearers.

Alice Lloyd (class of 1913, St. Luke's Hospital, Jacksonville, Fla.), on February 7, of pneumonia, in Tampa, Fla. Miss Lloyd leaves a host of friends and a record of conscientious and untiring service.

Inez C. Lord (class of 1895, Boston City Hospital), on March 26, at Tyngsboro, Mass. In the death of Miss Lord the nursing profession lost one of its staunchest adherents as well as one of its most representative women. For nearly thirty years she gave of her time and energy to the physically ill in the hospital. Born in Limington, Maine, in an environment of culture and refinement, she began life with more than ordinary prospects for usefulness, while other educational opportunities well fitted her for her later work. She began her training at the Boston City Hospital in 1894, becoming a member of a class and a coterie noted in that great institution for their accomplishments in their chosen work. Upon graduation she consented to remain in charge of one department or another for several years or until she became assistant superintendent of the Lowell General Hospital where she served with unusual acceptance for ten years, going

finally to take up the work of superintendent of nurses in the school connected with the Rhode Island Hospital at Providence. After twelve years of devotion to the uplift and extension of the school she closed her labors with the beginning of her illness, last November. As a nurse she had a clear vision of possibilities for her profession, but she was never visionary; as an instructor she had few equals among nurses; as a woman she was modest and retiring; as a Christian she was devout and practical; as a friend she was reliable and caused no pang of disappointment. Her passing has left a void which can not be filled by another. While her associates bow in grief at their loss, they rejoice in memories of their good friend by whose side they worked and from whose lips there fell strengthening words of wisdom and encouragement.

Mrs. Frank Marquette (Anna McMahon, class of 1917, Albany Hospital Training School, Albany, N.Y.), on April 4, at Watervliet, N.Y.

Caroline Hall Metcalf (class of 1892, Homeopathic Hospital, Pittsburgh), on February 20, in the Hospital, of pneumonia. Following her graduation Mrs. Metcalf spent one year in the office of Dr. O'Brien at Homewood, Pa., after which she returned to private nursing for a time, eventually accepting a position as Superintendent of the Zanesville City Hospital, Zanesville, Ohio, which position she held for seven years and where she organized a training school for nurses and graduated the first class. At the end of seven years she resumed private nursing and at the start of the World War was granted special permission to go overseas. While waiting for her commission, the influenza epidemic broke out and she volunteered her services. After several weeks of work in the emergency hospitals which were established for ship builders and coal miners, she was herself stricken, only recovering after a long and very serious illness. She later held a position as Community Nurse under the Red Cross at Albion, N. Y., for one year, following which she was engaged as Health Teacher in the public schools in the same place. At the end of her service in the public schools, Mrs. Metcalf resumed private nursing and continued this work until the time of her death, which was hastened by overwork.

Bertha Estella Norman (class of 1917, Woman's Hospital Training School for Nurses, Saginaw), of tuberculosis, April 4, at the home of her sister in Bay City. Miss Norman was a private duty nurse in Saginaw from her graduation until September 21, 1918, when she entered the U. S. Naval Reserve Force. She was first assigned to Great Lakes Training Station, then transferred to Washington, D. C., and later was sent to Annapolis. She contracted influenza during the epidemic of 1918 but returned to duty as soon as she recuperated. Upon her discharge from service she accepted a position as supervisor on the surgical floor of the hospital, from which she graduated, which duties she performed for only a few months because of ill health. She developed lobar pneumonia in February, 1922, from which she never fully recovered, and entered East Lawn Sanatorium, Detroit, October 13, 1922, where she remained for a period of three months, when she was transferred to the home of her sister in Bay City. She was a member of Phillips-Elliott-Hodges Post of the American Legion and was buried with military honors. The passing of Miss Norman has caused a vacancy not easily filled. Her pleasing personality made friends wherever she went. During her entire illness she still maintained her cheery disposition and never lost hopes for recovery.

Edith Olson (class of 1917, Swedish Hospital, Seattle, Wash.), recently, at Mount Vernon, of pneumonia. Miss Olson has been doing nursing work in Mount Vernon since her graduation.

Mrs. E. G. Brennan (Claire Pease, class of 1910, Meriden Hospital, Meriden, Conn., and a graduate of the School of Public Health Nursing, New Haven), on March 8, at her home in Meriden, after a two days' illness with pneumonia. This is an irreparable loss to the nursing profession and to Mrs. Brennan's many friends.

Cornelia Pierce (class of 1893, Methodist Episcopal Hospital, Brooklyn), at the Hospital, on March 15.

Floer Plamondon (class of 1921, St. Vincent's Hospital, Portland, Ore.), recently.

Elda Robertson (class of 1905, West Side Hospital, Chicago), recently, after a four days' illness with pneumonia.

Mrs. Anna Keenan Reesque (class of 1920, St. Elizabeth's Hospital, Chicago), on February 24, at Marinette, Wis. Mrs. Reesque is the first of her alumnae to die. She will be missed by all who knew her.

Mrs. Stave (Anna Strube, class of 1917, New York Hospital, New York). Her classmates will long remember her bright smile and sunny disposition.

Sarah Swift (Ann Arbor), on March 20. Miss Swift had been engaged in public health work in Grand Rapids for more than fifteen years. She worked for the Grand Rapids Anti-Tuberculosis Society for four years, giving her entire time to the work. She did notable work in preventing tuberculosis among children and teaching health habits to those under her care. It is always said of her that "she was an example of the type of nurse who is a nurse at heart, giving up all personal desires and pleasures to serve sick humanity." Burial was at Grass Lake, Mich.

Mrs. Mabel Beest Thompson (class of 1907, Toledo Hospital, Toledo, Ohio), on February 11, after a short illness. Mrs. Thompson had done district and private duty nursing.

Mrs. William F. Robertson (Alta V. Wallace, class of 1897, Jewish Hospital, Philadelphia), on February 10, in California. Mrs. Robertson was one of the oldest graduates of her school and was always interested in Alumnae affairs. She had lived in Virginia until recently.

Mrs. Hartley (L. M. Weston, class of 1893, New York Hospital, New York), on February 10, at Ottawa, Can.

Marion Clark Wiggin (class of 1910, Massachusetts Homeopathic Hospital, Boston), on March 7, at Robinson Memorial Hospital. After her graduation Miss Wiggin did private duty nursing until her marriage in 1913.

Alta Wilson (class of 1921, St. Luke's Hospital, New York), suddenly, at Eagle Rock, California, on January 23. Miss Wilson was doing hospital work in Los Angeles.

Mrs. Charles Leonard (Florence Yieter, class of 1903, Connecticut Training School, New Haven), on February 28, in New York City, after a long illness. Mrs. Leonard's home was in Plainfield, N. J.

BOOK REVIEWS

NURSING AND NURSING EDUCATION IN THE UNITED STATES. Final report of a Committee of which C. E. A. Winalow, M.D., was Chairman and Josephine Goldmark, Secretary. The Macmillan Company, New York. Price, \$2.

The reviewer who undertakes to examine and appraise the report made by Josephine Goldmark, Secretary of the Rockefeller Committee for the Study of Nursing and Nursing Education, is confronted with a serious task, for this survey, with the Committee report for which it supplies a foundation, is widely and properly regarded as the most notable and valuable contribution ever made to nursing education and nursing history.

The report presents the result of a three-year study in the course of which every phase and development of nursing work has been carefully considered and analyzed. The brief summary, with the conclusions of the Committee, which was published in advance of the whole report, scarcely prepared us for the extraordinarily comprehensive whole, which reveals the remarkable development and success of certain phases of nursing work, but which discloses a regrettable lack of success or progress along other lines.

The arrangement of the context is remarkable; dry statistics and hard facts have been woven into a volume which is intensely interesting,—not only to those personally concerned with nursing and nursing education, but to the general public. One wonders how many experts in vocational guidance are familiar with

the manifold attractive opportunities which nursing offers despite its drawbacks.

While it is not possible to agree with all the conclusions in the light of many facts now published for the first time, it is apparent that in framing its deductions the Committee has not been drastic, but has been lenient and merciful in its arraignment of indefensible conditions in "schools" that are schools in name only. Dr. Beard, in his recently published Review and Critique, remarks that here and there one gets a hint of compromise between the conflicting views of physicians and nurses rather than the exclusive consideration of the good of the public. With such a tremendous mass of material before it, the Committee could hardly escape the necessity of adopting a selective process of some sort; and without quarrelling with the Committee's conclusions, one may be permitted to say that Miss Goldmark's extended observations present many opportunities for further study and for inferences which the Committee omitted to make.

While the Committee frankly admits the existence, use, and need of a "subsidiary nursing group," it stresses the danger to the public of such a group if their training and practice are not properly controlled. So far as the adequate training of student nurses is concerned, the report declares that "there is no short cut to the end which we all have in view—the establishment of a sound educational policy which will attract desirable students. This in turn necessitates proper financial support through

taxes, voluntary contributions or philanthropic foundations." The report emphasizes the strategic value of the University school in its relation to the nursing movement in general and indicates the great importance of its fullest development.

The study of the Public Health Nursing situation is a revelation of twenty years' accomplishment and growth, from a beginning of fifty-eight organizations and one hundred and thirty nurses in 1901, to over four thousand such organizations with eleven thousand nurses employed in 1921. Statistics of every form of public activity are furnished. As an illustration, we are told that in New York City alone the proportions of corrected defects in school children increased from six per cent. to eighty-three per cent. with the advent of the home visiting school nurse. Descriptions of the work of the nurse in the school and home point to the utter futility of entrusting to students not properly prepared, such unlimited responsibility and opportunity. The safeguarding of motherhood and infancy, the reduction of infant mortality, and the value of public health nursing in the home are all fascinatingly presented and dealt with.

The nodal point in the discussion is the individual nurse, "her success or failure in making personal contacts—in health teaching and in cooperation with all social agencies—also the influence or effect of her education or lack of education as a deciding factor in such work." The problem centers in the School of Nursing, with its double character of educational institution and provider of nursing service for the hospital. The irrepressible conflict between the

service of the sick and the claims of education, always puzzling until the underlying principles are grasped and applied, is brought into bold relief in the section devoted to the school of nursing. The Committee emphasizes the "fatal error on the part of both hospital and nursing schools of generally accepting as inherent and final the existing relationship between the two and for failing to give public expression to the inevitable consequences of continuing to do so."

In the paragraph just quoted the committee has placed its finger upon the vital point. The need for publicly proclaiming the defects in existing methods and convincing the nation of the necessity for sweeping change and improvement in the character of nursing education in hospitals, should be accepted as the first step toward constructive reform. Public opinion should be so moulded that new hospitals will be compelled to start with a better educational and nursing basis, while those already engaged in the work should have their eyes opened to the necessity of fundamental changes and improvements. To quote—"the failure of the nursing school is its failure to *teach*—the worst charge which can be brought against an educational institution. The cause of its failure is primarily the lack of money—without sufficient funds the wisest educational program must necessarily be frustrated."

An effort to fix the responsibility for the deficiencies which characterize schools of nursing today leads to the conclusion that it is the function of the Training School Board or Committee to correctly interpret the educational needs of the school not only to the Board but

to the community. A study of the composition of the average training school committee indicates the great need of change here, too, if such interpretation is to be intelligently and authoritatively made. The report does not, however, sufficiently emphasize the fact that in the case of the lesser schools which do not, and for many years to come cannot, exist independently of hospitals, this interpretation must be assigned to hospital boards since in such cases it is the hospital board that creates and maintains the so-called school of nursing.

The sections of the report which deal with the curriculum and teaching methods employed, especially in many of the poorer types of schools, are an arraignment of the injustice to students of permitting such conditions to exist without protest.

The report is full of constructive criticism and of valuable teaching suggestions. The critique of nursing work as practiced by students in the hospital frankly indicates the impossibility of definite improvement in a large proportion of hospitals with their understaffed wards and overworked pupil nurses. The failures of the student nurse are shown to be due many times to a lack of organization of nursing work on the ward, and a lack of time and opportunity for supervision and bedside instruction by teachers and supervisors.

An enlightening study of diet kitchen educational methods (too often lack of method) and of the failure to make use of the great educational opportunities offered through the out-patient department of the hospital, frequently due to the waste of students' time in routine duties and absence of planned instruction, affords much food for thought for

those who are seriously interested in nursing education.

The physician instructor is discussed as to his desire or ability to correlate his instruction with ward teaching and as to his success or failure to teach in a broad way the important principles of disease prevention.

Conditions of work for student nurses are discussed in connection with the hospital need of a twenty-four hour nursing day and a seven day week service; the failure of hospitals and nursing schools to provide for one full day of rest in seven for their students and graduate nurses is not overlooked. How many hospitals would survive in public esteem if their actual treatment of pupil nurses in the matter of hours of duty were laid bare by the local press?

The ratio of patients to nurse, the living conditions of students, and the greatly increased cost of educating nurses are dealt with frankly and fairly.

One's reaction on laying down the report is that the condemnation of present conditions is fully justified and that no one connected with the situation has escaped criticism, although the criticism throughout is friendly and fair. The statistics and tables with which the volume abounds are so interesting and significant that it is hard to refrain from quoting them freely in reviewing the volume.

Miss Goldmark pays a generous tribute to nurses in her statement that "the greatest part of the progress made in nursing education has been made undeniably by the nurses themselves often without aid and without thanks—a progress made in the face of indifference, negligence and often of active opposition—a progress which has had to move

squarely against the vested interests of hospitals long in control of the destiny of nursing education."

We have in the report an invaluable record of nursing education in the year 1922. The report offers a safe and sound basis for the consideration and discussion of many of our most difficult nursing problems and for future development and procedure. It is a great thing to have all the facts in a single volume. Not only the nurses of the country but the public is deeply indebted to the Rockefeller Foundation for undertaking and carrying out a survey so extensive and so greatly needed. The development of nursing along safer and wiser lines is assured as a result of this splendid piece of work. Miss Goldmark has scored a triumph by her masterly handling of an exceedingly complex problem.

ELIZABETH A. GREENER

New York

VOCATIONAL EDUCATION. By David Snedden, Ph.D. The Macmillan Company, New York. Price, \$2.

Not even his friends and students at Teachers College, Columbia University, always agree with Dr. Snedden, but it is a rare person who does not find him intensely stimulating. At our present stage of development in nursing education, when we are faced with the neces-

sity of modifying our system somewhat to meet the new demands of a new age, it is exceedingly helpful to see just how other vocations have worked or are working out the same kind of problems. Indeed one is struck constantly with the similarity of their problems to ours.

Although Dr. Snedden draws most of his illustrations from industrial and commercial occupations, he brings out constantly the broad fundamental principles on which all forms of vocational training rest and the general tendencies which all are inclined to follow. He makes rather frequent reference to nursing and while noting our shortcomings, particularly our continued use of the almost obsolete apprenticeship system, he never fails to commend the practical side of our training and its close touch with the real problems of life. The whole book is a challenge to us to justify our present system of education or to change it. The earlier chapters, including the following titles, will be found, on the whole, most helpful: The Meaning of Vocational Education, The Social Need for Better Vocational Education, The Relation of General to Vocational Education, and Principles of Method in Vocational Education.

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Diet in Institutional Convalescence by Pauline Kirchenbaum, is based on a study of the care of 35,000 convalescents by the Burks Foundation at White Plains, N. Y. Talks are given which indicate the census, the total calories, proteins and fat furnished by the diet; the distribution of calories among the food materials; the market list, and specimen menus for winter and for summer. Says the writer, "good convalescent therapy (which is at its best preponderantly mental, habit and courage therapy) depends upon normalizing and re-socializing in the quickest way. Dietary normalizing is a main element in this composite of sound convalescent procedure."

Modern Hospital, Feb., 1923.

The Campaign against Malnutrition, Public Health Bulletin No. 134, was prepared by the Advisory Committee on Food and Nutrition of the National Health Council in cooperation with the U. S. Public Health Service. It gives specific information on the organization and administration of this work in communities of all types.

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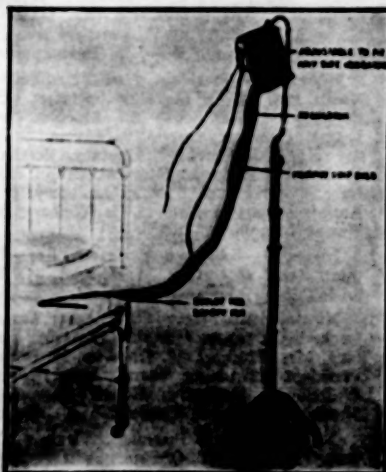
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